

Service Code: AFC
Service Name: DSPD Adult Foster Care
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 1/24/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

The purpose of this service is to provide an adult with disabilities the opportunity to reside in a small residential setting. In a family atmosphere, while developing independent living skills.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$6.49

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$14.99

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	07/01/1991	\$13.84	07/01/2000
Daily	COLA	08/08/2001	\$14.35	07/01/2001
Daily	COLA	07/09/2002	\$14.99	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
MR	MR/DD

Service Code: AGE
Service Name: Senior Supports

Creation Date: 1/24/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Senior Supports are provided to older individuals, or individuals who because of medical problems or physical disabilities have needs that closely resemble those of an older person, who desire a lifestyle consistent with that of the community's population of similar age or circumstances. These supports serve the purpose of facilitating community inclusion and preventing social isolation. Senior Supports consist of a variety of activities that are designed to assist the individual in maintaining skills and stimulating social interactions with others. The activities are individualized and may occur in any community setting, including the individual's place of residence, in accordance with the individual's stated choice and the objectives of the individual's support plan relating to community integration and prevention of social isolation.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$133.69

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to senior and day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are established in the individual's Day Supports Worksheet.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule: Policy 2-7 Procedures 1-6 inclusive

Rule R539-8-2

Policy 2-8 pertaining to Senior Supports

Tx/Serv Requirement

Senior Supports are provided to older individuals, or individuals who because of medical problems or physical disabilities have needs that closely resemble those of an older person, who desire a lifestyle consistent with that of the community's population of similar age or circumstances. These supports serve the purpose of facilitating community inclusion and preventing social isolation.

Senior Supports consist of a variety of activities that are designed to assist the individual in maintaining skills and stimulating social interactions with others. The activities are individualized and may occur in any community setting, including the individual's place of residence, in accordance with the individual's stated choice and the objectives of the individual's support plan relating to community integration and prevention of social isolation.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Senior Supports are listed in the Day Supports Worksheet (Attachment E).

Service Code: APP**Service Name: Authorized Psychological Payment****Contract Type:** Either a non-fixed or fixed amount contract required**Residential:** No**Creation Date:** 1/24/2001**Obsolete Date:****Agencies Using Code**DCFS
DSPD***Description:***

Psychological assessments for mental and emotional handicapped individuals. These services include identifying the existence, nature or extent of psychological impairment or deterioration, psychological testing and evaluation. This code is also used for payment of ICAP verification evaluations and Authorized Psychological payments. These services can be court ordered and are done by a Licensed Clinical Psychologist or Psychiatrist. Assessments can be done for a child and/or parent.

USSDS Rate Ceiling: \$1500 (max established by contract)

\$496.64 per session mental retardation expert contract

\$27.54 per hour mental retardation expert contract

\$154.83 per session psychologist

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Personal Need	\$1,500.00
Hourly	\$28.20
Session	\$508.56
Session	\$158.55

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
AT	SSI AGED
BT	SSI BLIND
DT	SSI DISABLED
FB	CHILD WELFARE NON IV-E
HP	S.S. PRE-PAID HEALTH PLAN
IT	INCOME ELIGIBLE
MR	MR/DD
OB	OBRA
RF	REFUGEE
SG	SELF DETERM NON-MEDICAID

Service Code: BPB
Service Name: Behavioral Programming (BA/BS Level Staff)
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/24/2001
Obsolete Date:
Agencies Using Code
DSPD

Description:

Individually designed interventions to replace the recipient's maladaptive behaviors with socially acceptable appropriate behaviors which increase the individual's ability to be integrated into the community. Includes complete assessment of the maladaptive behaviors, development of a structured behavioral intervention plan, implementation of plan, training and supervision of caregivers and behavioral aides and periodic reassessment of plan. Service provided at the individual's home or in the community.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$4.71
Hourly	\$18.84

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND

Service Code: BPM
Service Name: Behavioral Programming (MA/MS Level Staff)

Creation Date: 1/24/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
DSPD

Description:

Individually designed interventions to replace the recipient's maladaptive behaviors with socially acceptable appropriate behaviors which increase the individual's ability to be integrated into the community. Includes complete assessment of the maladaptive behaviors, development of a structured behavioral intervention plan, implementation of plan, training and supervision of caregivers and behavioral aides and periodic reassessment of plan. Service provided at the individual's home or in the community.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$7.81
Hourly	\$31.25

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND

Service Code: BPP

Service Name: Behavioral Programming (PHD Level Staff)

Contract Type: Open or non-fixed dollar amount contract required

Residential: No

Creation Date: 1/24/2001

Obsolete Date:

Agencies Using Code

DSPD

Description:

Individually designed interventions to replace the recipient's maladaptive behaviors with socially acceptable appropriate behaviors which increase the individual's ability to be integrated into the community. Includes complete assessment of the maladaptive behaviors, development of a structured behavioral intervention plan, implementation of plan, training and supervision of caregivers and behavioral aides and periodic reassessment of plan. Service provided at the individual's home or in the community.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$15.20
Hourly	\$60.78

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND

Service Code: CCK
Service Name: Self Determination Companion Services check writing fees

Creation Date: 10/24/2001
Obsolete Date: 09/01/2002

Contract Type: Closed or fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

To provide accurate accounting and processing for checks written for non-medical care, supervision and socialization to a functionary-impaired adult. This service does not provide hands on medical care.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Personal Need	\$3.50

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Personal Need	\$3.50

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Personal Need	Initial Review	10/24/2001	\$3.50	10/24/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: CH1
Service Name: Chore Services (Individual Provided)
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/24/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Services needed to maintain the home in a clean, sanitary and safe environment. This services includes heavy household chores such as washing floors, windows and walls, tacking down loose rugs and tiles, moving heavy items of furniture in order to provide safe access and egress. These services will be provided only in cases where neither the client nor others in the household are are capable of performing or financially providing for them, and where no other relative, caretaker, landlord, community volunteer agency or third party payor is capable of or responsible for their provision. In the case of rental property, the responsibility of the landlord, pursuant to the lease agreement, will be examined prior to authorization of service. These services must not be available under the state plan.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$3.08

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: CH2
Service Name: Chore Services (Agency Provided)
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/24/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Services needed to maintain the home in a clean, sanitary and safe environment. This services includes heavy household chores such as washing floors, windows and walls, tacking down loose rugs and tiles, moving heavy items of furniture in order to provide safe access and egress. These services will be provided only in cases where neither the client nor others in the household are capable of performing or financially providing for them, and where no other relative, caretaker, landlord, community volunteer agency or third party payor is capable of or responsible for their provision. In the case of rental property, the responsibility of the landlord, pursuant to the lease agreement, will be examined prior to authorization of service. These services must not be available under the state plan.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$3.68

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: CLI
Service Name: Community Living Intensive Supports
Contract Type: Either a non-fixed or fixed amount contract required
Residential: No

Creation Date: 1/24/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Community Living Intensive Supports are designed to assist an individual gain and / or maintain skills to live as independently as possible in a community setting, and based on the outcome for community living indicated in the individual's support plan, live in the type of housing arrangement they choose. The individual's support plan identifies the type, frequency, and amount of support required by the person based on their preferences. Supports can include up to 24 hours of supervision but the actual hours of direct care staff support will be indicated in the individual's support plan. These individuals require an enhanced Direct Staff Salary and Training, to better retain direct care staff. The "Individualized Supports" work sheet contain the authorized rates for each client.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$337.85

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Treatment and service requirements are documented in the individual's plan and community living worksheet.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet .

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
 Policy 2-7 Provider Training and Personnel Requirements

Rule R539-6-1, R539-6-4, R539-4-3

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Community Living Supports serve the purpose of facilitating independence and promoting community integration by assisting an individual to gain or maintain skills necessary to live as independently as possible in the type of community-based housing arrangement the individual chooses (and can afford), consistent with the outcome for community living defined in the individual's support plan. There are three basic models for Community Living Supports that are frequently referred to: Group Home, Mini Group Home, and Supervised Apartment. Typically a community living setting is a single residence (home) in which four (4) to eight (8) individuals with disabilities reside. A Supported/Supervised Apartment or mini group home setting is three (3) or less individuals. The Division of Services for People with Disabilities is looking towards doing away with settings with 4 or more individuals, and is moving towards settings of three or less, however, it is included for reference as we are in a period of transition.

Community Living Supports can include up to 24 hour direct care staff support. Actual type, frequency, and duration of direct care staff support, and other community living supports will be defined in the individual's support plan based on the individuals preferences, selected housing arrangement, assessed needs and spending limit.

The Community Living Worksheet (See Attachment E) is the tool used by the Division, the individual and their team of support, to cost out the supports that the individual has chosen in their person centered plan (limited by the individual's authorized spending limit). The worksheet provides choices among various types of supports. Once the supports are selected, the worksheet specifies the type of supports, the number of hours, and hours of staffing supports provided each day or month. The Division will audit the aggregate monthly hours, not daily hours to ensure that services have been provided.

Provider reimbursement for direct personnel costs is based on an hour of service at a standard hourly wage rate plus the benefit package as well as related expenses which account for staff vacations, sick time, and leaves for training. Also included in the CLS and CLI rate is a supervision rate, administration rate, and non-personnel operating costs.

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to persons under age 22 children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (Attachment E).

Service Code: CLS

Creation Date: 1/24/2001

Service Name: Community Living Supports

Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required

Agencies Using Code

Residential: No

DSPD

Description:

Community Living Supports are designed to assist an individual gain and / or maintain skills to live as independently as possible in a community setting, and based on the outcome for community living indicated in the individual's support plan, live in the type of housing arrangement they choose. The individual's support plan identifies the type, frequency, and amount of support required by the person based on their preferences. Supports can include up to 24 hours of supervision but the actual hours of direct care staff support will be indicated in the individual's support plan.

The "Individualized Supports" work sheet contain the authorized rates for each client.

USSDS Rates as of

Unit

Rate

Daily

\$337.85

Service Eligibility

Eligibility

Description

BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Treatment and service requirements are documented in the individual's plan and community living worksheet.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet .

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
 Policy 2-7 Provider Training and Personnel Requirements
 Rule R539-6-1, R539-6-4, R539-4-3

Tx/Serv Requirement

Community Living Supports serve the purpose of facilitating independence and promoting community integration by assisting an individual to gain or maintain skills necessary to live as independently as possible in the type of community-based housing arrangement the individual chooses (and can afford), consistent with the outcome for community living defined in the individual's support plan. There are three basic models for Community Living Supports that are frequently referred to: Group Home, Mini Group Home, and Supervised Apartment. Typically a community living setting is a single residence (home) in which four (4) to eight (8) individuals with disabilities reside. A Supported/Supervised Apartment or mini group home setting is three (3) or less individuals. The Division of Services for People with Disabilities is looking towards doing away with settings with 4 or more individuals, and is moving towards settings of three or less, however, it is included for reference as we are in a period of transition.

Community Living Supports can include up to 24 hour direct care staff support. Actual type, frequency, and duration of direct care staff support, and other community living supports will be defined in the individual's support plan based on the individuals preferences, selected housing arrangement, assessed needs and spending limit.

The Community Living Worksheet (See Attachment E) is the tool used by the Division, the individual and their team of support, to cost out the supports that the individual has chosen in their person centered plan (limited by the individual's authorized spending limit). The worksheet provides choices among various types of supports. Once the supports are selected, the worksheet specifies the type of supports, the number of hours, and hours of staffing supports provided each day or month. The Division will audit the aggregate monthly hours, not daily hours to ensure that services have been provided.

Provider reimbursement for direct personnel costs is based on an hour of service at a standard hourly wage rate plus the benefit package as well as related expenses which account for staff vacations, sick time, and leaves for training. Also included in the CLS and CLI rate is a supervision rate, administration rate, and non-personnel operating costs.

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to persons under age 22 children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (Attachment E).

Service Code: CM1
Service Name: Self Determination Companion Services
Contract Type: Closed or fixed dollar amount contract required
Residential: No

Creation Date: 10/24/2001
Obsolete Date: 09/01/2002
Agencies Using Code
 DSPD

Description:

To provide non-medical care, supervision and socialization to a functionary-impaired adult. Self determination companions may assist the individual with tasks such as meal preparation, laundry, and shopping, but do not perform these activities as discrete services. This service does not provide hands on medical care. Provider may also perform light housekeeping tasks, which are incidental care and supervision of the client. This service is provided in accordance with a therapeutic goal.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$53.23

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$53.23

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Review	10/24/2001	\$53.23	10/24/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: COM**Creation Date:** 1/24/2001**Service Name: Companion Services****Obsolete Date:****Contract Type:** Open or non-fixed dollar amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

The purpose of Companion Services is to provide non-medical care, supervision and socialization to a functionally impaired adult. Companions may assist the individual with such tasks as meal preparation, laundry and shopping, but do not perform these activities as discrete services. This services does not provide hands?on medical care. Providers may also perform light housekeeping tasks which are incidental to the care and supervision of the client. This service is provided in accordance with a therapeutic goal in the plan of care and is not purely diversionary in nature.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$2.92
Daily	\$53.23

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$53.23

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Review	09/19/2001	\$53.23	09/19/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratio is 1:1, hourly

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7, Procedures 1, 2, 3B, 3C, 6, and 7C.

Rule R539-6-1 to 4

Policy 2-8 Procedure 1.

Tx/Serv Requirement

Companion services can be non-medical care, supervision and socialization, provided to a functionally impaired adult. Companions may assist the individual with such tasks as meal preparation, laundry and shopping, but do not provide these activities as discrete services. The provision of companion services does not entail hands-on medical care. Providers may also perform light housekeeping tasks which are incidental to the care and supervision of the client. This service is provided in accordance with a therapeutic goal in the plan of care, and is not diversional in nature. This service can be provided on a quarterly hour basis, or on a daily basis as a live in companion. Companions may perform services on a hourly basis or reside with the individual as a roommate.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Companion Services are listed in the Community Living Supports Worksheet (Attachment E).

Service Code: CSG
Service Name: Counseling Services (Group Therapy Session)

Creation Date: 1/24/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Counseling is a service designed to benefit the individual directly to resolve conflict or issues that may help the individual remain in the community. This counseling would enable the individual to manage his stress and improves the likelihood that the individual will continue to be cared for in his/her own home or the home of his/her family, thereby preventing premature and otherwise unnecessary institutionalization. Services must be included in the plan of care and for the direct benefit of the individual and be delivered in a group setting. These services must not be available under the State plan or through Local Mental Health Agencies.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$4.58

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID

Service Code: CSQ
Service Name: Counseling Services (Individual Therapy Session)

Creation Date: 1/24/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Counseling is a service designed to benefit the individual directly to resolve conflict or issues that may help the individual remain in the community. This counseling would enable the individual to manage his stress and improves the likelihood that the individual will continue to be cared for in his/her own home or the home of his/her family, thereby preventing premature and otherwise unnecessary institutionalization. Services must be included in the plan of care and for the direct benefit of the individual and be delivered in an individual setting. These services must not be available under the State plan or through Local Mental Health Agencies.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$17.02

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID

Service Code: DSC
Service Name: Day Support Worksheet/Children
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Day Supports worksheet is designed to facilitate independence and promote community inclusion and contribution. Supports provide assistance for individuals to participate in activities in integrated settings with individuals without disabilities (not including staff paid to support the individual). All supports are identified in the individual's support plan and are meaningful activities, which may or may not be work related but do relate to the identified outcomes. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance their independence, and / or maintain physical and mental skills. Day supports may be provided anytime during a 24 hour day at locations of the individual's preference and are most commonly provided in integrated community settings. The Day Support Worksheet for Children will be the same worksheet as approved for the code DSW (Day Supports Worksheet).

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$133.69

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
Policy 2-7 Procedures 1-6 inclusive.
Rule R539-8-1A

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DSW**Service Name: Day Supports Worksheet****Contract Type:** Open or non-fixed dollar amount contract required**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:****Agencies Using Code**

DSPD

Description:

Day Supports worksheet is designed to facilitate independence and promote community inclusion and contribution. Supports provide assistance for individuals to participate in activities in integrated settings with individuals without disabilities (not including staff paid to support the individual). All supports are identified in the individual's support plan and are meaningful activities which may or may not be work related but do relate to the identified outcomes. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance their independence, and / or maintain physical and mental skills. Day supports may be provided anytime during a 24 hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$134.22

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$163.86
Hourly	\$15.44

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	08/01/1999	\$163.86	08/01/1999

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by

the Division . **Record Keeping**

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DT1**Service Name: Day Training level 1****Contract Type:** Open or non-fixed dollar amount contract required**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:** 07/01/2001**Agencies Using Code**

DSPD

Description:

Day Training services are provided to individuals who require training and support in the acquisition of independent living skills. The program provides individuals the opportunity to participate in activities that increase attendance to task, elicit appropriate social and emotional interaction, relieve isolation and encourage independent utilization of community resources. The intensity of service provided to the individual is determined by their ICAP service score. This is for an individual in need of level 1 care.

USSDS Rates as of**Unit****Rate****BCM Maximum Allowable Rate (MAR)****Unit****MAR Rate**

Daily

\$32.30

BCM Rate Actions**Unit****Action****Action Date****New Rate****Effective Date**

Daily

Initial Review

12/01/1992

\$29.82

07/01/2000

Daily

COLA

08/09/2001

\$30.93

07/01/2001

Daily

COLA

07/10/2002

\$32.30

07/01/2002

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DT2**Service Name: Day Training level 2****Contract Type:** Open or non-fixed dollar amount contract required**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:** 07/01/2001**Agencies Using Code**

DSPD

Description:

Day Training services are provided to individuals who require training and support in the acquisition of independent living skills. The program provides individuals the opportunity to participate in activities that increase attendance to task, elicit appropriate social and emotional interaction, relieve isolation and encourage independent utilization of community resources. The intensity of service provided to the individual is determined by their ICAP service score. This is for an individual in need of level 2 care.

USSDS Rates as of**Unit****Rate****BCM Maximum Allowable Rate (MAR)****Unit****MAR Rate**

Daily

\$36.32

BCM Rate Actions**Unit****Action****Action Date****New Rate****Effective Date**

Daily

Initial Review

12/01/1992

\$33.53

07/01/2000

Daily

COLA

08/09/2001

\$34.78

07/01/2001

Daily

COLA

07/10/2002

\$36.32

07/01/2002

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DT3**Service Name: Day Training level 3****Contract Type:** Open or non-fixed dollar amount contract required**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:** 07/01/2001**Agencies Using Code**

DSPD

Description:

Day Training Habilitative services are provided to individuals who require training and support in the acquisition of independent living skills. The program provides individuals the opportunity to participate in activities that increase attendance to task, elicit appropriate social and emotional interaction, relieve isolation and encourage independent utilization of community resources. The intensity of service provided to the individual is determined by their ICAP service score. This is for an individual in need of Level 3 care.

USSDS Rates as of**Unit****Rate****BCM Maximum Allowable Rate (MAR)****Unit****MAR Rate**

Daily

\$52.66

BCM Rate Actions**Unit****Action****Action Date****New Rate****Effective Date**

Daily

Initial Review

04/01/1994

\$48.62

07/01/2000

Daily

COLA

08/09/2001

\$50.43

07/01/2001

Daily

COLA

07/10/2002

\$52.66

07/01/2002

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DTA
Service Name: Day Training Non-Site based Services
 (Administration & Direct Services)

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Either a non-fixed or fixed amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Day Training Non-Site based services assist individuals in acquiring, retaining or improving self help, socialization and adaptive skills necessary to reside successfully in home and community based settings. These services are provided in a community, non-site based setting on a quarterly hour basis typically using staffing ratios of 1:1 through 1:3. The intensity of service is determined by the individual and their interdisciplinary team. This service is for the first 960 quarterly-hour billable units of service annually and/or the first 80 units monthly. Services include direct service trainer, direct supervision travel and administrative overhead costs. Additional services above the 80 units per month (960 annually) will be billed at the DTB rate.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$7.50

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DTB
Service Name: Day Training Non-Site based Services (Direct Services Only)

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Either a non-fixed or fixed amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Day Training Non-Site based services assist individuals in acquiring, retaining or improving self help, socialization and adaptive skills necessary to reside successfully in home and community based settings. These services are provided in a community, non-site based setting on a quarterly hour basis typically using staffing ratios of 1:1 through 1:3. The intensity of service is determined by the individual and their interdisciplinary team. This service to be provided for all Day Training Non-Site based service unit exceeding the DTA limit of 80 quarterly hour units per month or 960 units annually. Services include direct service trainer, direct supervision and travel.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$3.23

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DTC**Creation Date: 1/25/2001****Service Name: Day Training Crisis****Obsolete Date: 09/01/2002****Contract Type:** Either a non-fixed or fixed amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

The Day Training Crisis service has been established for individuals in existing Day Training programs who require a more extensive staffing ratio and level of support services than the Day Training Exceptional (DTE) service. People requiring this individually negotiated service and level of support demand an intensive behavioral oriented crisis program with a minimum of 1:1 staffing for the entire program day.

USSDS Rates as of**Unit****Rate**

Daily

\$134.22

Service Eligibility**Eligibility****Description**

SG

SELF DETERM NON-MEDICAID

SM

SELF DETERM MEDICAID

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DTE
Service Name: Day Training level 4-Exception
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 09/01/2002
Agencies Using Code
 DSPD

Description:

Day Training Habilitative services are provided to individuals who require training and support in the acquisition of independent living skills. The program provides individuals the opportunity to participate in activities that increase attendance to task, elicit appropriate social and emotional interaction, relieve isolation and encourage independent utilization of community resources. This code is used for individuals, residential ICAP level Five (5), requiring an intensive Behavior Modification program with a 1:1 staffing ratio. The intensity of service is approved by the Regional Director. The Regional Director can authorize the use of this service for up to 30 days. After 30 days, State Office must give approval to continue the service.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$74.14

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$82.24

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	04/01/1993	\$75.92	07/01/2000
Daily	COLA	08/09/2001	\$78.76	
Daily	COLA	07/10/2002	\$82.24	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: DTH
Service Name: Day Training Health Supports Adjustment
 (Res. Children Only)

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Supplemental funding provided to the Day Training provider to support Attendant Care assistance for children with disabilities in residential facilities who are attending Day Training Sites during their summer school vacations. Also, adults who are severely physically challenged receiving payment at DT1 and DT2 service levels. This adjustment requires DSPD approval and is paid only under MR eligibility.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$7.49

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
MR	MR/DD
SG	SELF DETERM NON-MEDICAID

Service Code: EA1

Service Name: Environmental Accessibility Adaptations

Contract Type: No contract allowed for this service

Residential: No

Creation Date: 1/25/2001

Obsolete Date:

Agencies Using Code

DSPD

Description:

Physical adaptations to the home needed to ensure the health and welfare of the individual, or enable the individual to function with greater independence in the home.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Personal Need	\$1,999.99

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: EA2
Service Name: Environmental Accessibility Adaptations
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Physical adaptations to the home needed to ensure the health and welfare of the individual, or enable the individual to function with greater independence in the home. Prior approval is required to pay under this code.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Personal Need	\$10,000.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: ELA
Service Name: Extended Community Living Supports/Adult
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Extended Community Living Supports / Adult is used to provide extended supports, up to six hours per day, to individuals who reside in a Community Living Support setting during the period of time that they are not in a day support / educational setting. This code is used for individuals age 22 and older. The focus of the support is an extension of the objectives / goals found in the individuals support plan. The level of support is based upon a one to one staffing ration. When the individual shares staff, the total number of hours billed for each individual will be reduced accordingly.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$3.46

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Division eligible individuals, who are recipients of Community Living Support services and who the team feels would not be best served by available day programs, may be considered for this specialized Community Living Support service. The reasons for this decision may include, but not limited to, choice of the person, temporary medical conditions and/or a physician's order, acute or recurrent cycles of maladaptive behavior, or the lack of resources that are able to meet the needs of the individual consumer.

Record Keeping

Treatment and service requirements are documented in the individual's plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-6

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Appropriate day services supports should be considered as the first avenue of daytime services. Prior to the use of the Extended Community Living service, day providers should be provided the opportunity to develop appropriate alternative day supports for the individual.

Extended Community Living may be provided in lieu of traditional out of home (day services, school, employment) if it is the choice of the individual, if a lack of appropriate alternative services prohibits the individual from participating in a day service or school provider or if it has been determined by the team that traditional day supports are not appropriate and the person would be better served in an Extended Community Living setting. Extended Community Living is an enhancement of Community Living Support and is to be provided by the person's current community living service provider. Extended Community Living is not to be considered as a day program or supported employment service, rather, it should only function as a community living support.

Recommendation for an Extended Community Living service shall require the consensus of the person's team.

Before this service can be established a plan must be written and include a minimum of the following components:

Documentation of the individual choice of service.

Statement of Justification.

Identified as a support need in the Person Centered Plan and the Individual Support. Plan written as outcomes and support time frames are established to identify how long this service will be needed.

The plan must address the expected duration of the need for Extended Community Living services. This service is to be used, as a temporary substitute for day services, however, in some cases there may be a need to use it in an ongoing day support situation where no other day services can be utilized. In this case the team (the individual, family, support coordinator, region supervisor and respective providers) must approve this situation and consider other service codes that may be more appropriate.

When the Plan calls for intermittent use of Extended Community Living due to a recurrent condition, then each new incident will require the notification of the Region Supervisor.

Staff Requirements

Staffing requirements are established in the individual worksheets.

Service Code: ELC
Service Name: Extended Community Living
 Supports/Children

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Extended Community Living Supports / Children is used to provide extended supports, up to six hours per day, to individuals who reside in a Community Living Support setting during the period of time that they are not in a day support / educational setting. This code is used for individuals younger than age 22. The focus of the support is an extension of the objectives / goals found in the individual's support plan. The level of support is based upon a one to one staffing ratio. When the individual shares staff, the total number of hours billed for each individual will be reduced accordingly.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$3.46

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Division eligible individuals, who are recipients of Community Living Support services and who the team feels would not be best served by available day programs, may be considered for this specialized Community Living Support service. The reasons for this decision may include, but not limited to, choice of the person, temporary medical conditions and/or a physician's order, acute or recurrent cycles of maladaptive behavior, or the lack of resources that are able to meet the needs of the individual consumer.

Record Keeping

Treatment and service requirements are documented in the individual's plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-6

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Appropriate day services supports should be considered as the first avenue of daytime services. Prior to the use of the Extended Community Living service, day providers should be provided the opportunity to develop appropriate alternative day supports for the individual.

Extended Community Living may be provided in lieu of traditional out of home (day services, school, employment) if it is the choice of the individual, if a lack of appropriate alternative services prohibits the individual from participating in a day service or school provider or if it has been determined by the team that traditional day supports are not appropriate and the person would be better served in an Extended Community Living setting. Extended Community Living is an enhancement of Community Living Support and is to be provided by the person's current community living service provider. Extended Community Living is not to be considered as a day program or supported employment service, rather, it should only function as a community living support.

Recommendation for an Extended Community Living service shall require the consensus of the person's team.

Before this service can be established a plan must be written and include a minimum of the following components:

Documentation of the individual choice of service.

Statement of Justification.

Identified as a support need in the Person Centered Plan and the Individual Support. Plan written as outcomes and supports.

Time frames are established to identify how long this service will be needed.

The plan must address the expected duration of the need for Extended Community Living services. This service is to be used, as a temporary substitute for day services, however, in some cases there may be a need to use it in an ongoing day support situation where no other day services can be utilized. In this case the team (the individual, family, support coordinator, region supervisor and respective providers) must approve this situation and consider other service codes that may be more appropriate.

When the Plan calls for intermittent use of Extended Community Living due to a recurrent condition, then each new incident will require the notification of the Region Supervisor.

Staff Requirements

Staffing requirements are established in the individual worksheets.

Service Code: ER1
Service Name: Extended Residential Support Hours Level 1
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Extended Residential services funding is used to provide extended residential support, up to six hours per day, to individuals who reside in residential settings during the period of time that they are not in a day program/educational setting. The focus of the support is an extension of the goals found in the recipient's residential support plan. The level of support is determined by the individual's ICAP support plan score. This code is for individuals in need of ICAP level 1 & 2 care.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Hourly	\$5.35

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Hourly	Initial Review	03/01/1992	\$4.94	07/01/2000
Hourly	COLA	08/09/2001	\$5.12	07/01/2001
Hourly	COLA	07/10/2002	\$5.35	07/01/2002

Service Code: ER2
Service Name: Extended Residential Support Hours Level 2
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Extended Residential services funding is used to provide extended residential support, up to six hours per day, to individuals who reside in residential settings during the period of time that they are not in a day program/educational setting. The focus of the support is an extension of the goals found in the recipient's residential support plan. The level of support is determined by the individual's ICAP support plan score. This code is for individuals in need of ICAP level 3 & 4 care.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Hourly	\$6.69

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Hourly	Initial Review	03/01/1992	\$6.17	07/01/2000
Hourly	COLA	08/09/2001	\$6.40	07/01/2001
Hourly	COLA	07/10/2002	\$6.69	07/01/2002

Service Code: ER3
Service Name: Extended Residential Support Hours Level 3
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Extended Residential services funding is used to provide extended residential support, up to six hours per day, to individuals who reside in residential settings during the period of time that they are not in a day program/educational setting. The focus of the support is an extension of the goals found in the recipient's residential support plan. The level of support is determined by the individual's ICAP support plan score. This code is for individuals in need of ICAP level 5 care.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Hourly	\$10.18

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Hourly	Initial Review	03/01/1992	\$9.40	07/01/2000
Hourly	COLA	08/09/2001	\$9.75	07/01/2001
Hourly	COLA	07/10/2002	\$10.18	07/01/2002

Service Code: ER4
Service Name: Extended Residential Support Hours Level 4
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Extended Residential services funding is used to provide extended residential support, up to six hours per day, to individuals who reside in residential settings during the period of time that they are not in a day program/educational setting. The focus of the support is an extension of the goals found in the recipient's residential IPP support plan. The level of service is determined by the individual's ICAP support plan score. This code is for individuals in need of ICAP level 5 care requiring a 1:1 staffing ratio.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Hourly	\$15.00

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Hourly	Initial Review	03/01/1992	\$13.85	07/01/2000
Hourly	COLA	08/09/2001	\$14.36	07/01/2001
Hourly	COLA	07/10/2002	\$15.00	07/01/2002

Service Code: ESR
Service Name: Educational Services Reimbursement
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Used to pay providers for individual client enrollment fees in High School or GED completion classes, Adult Basic Education classes, or Community college courses. These educational services may consist of special education, individual tutoring and registration fees for generic educational and related services as defined in section (16) and (17) of the Individual with Disabilities Education Act, but not paid under a program funded by that Act.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Hourly	\$14.62
Personal Need	\$500.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: FAP**Service Name: Fiscal Agent Payments****Contract Type:** Either a non-fixed or fixed amount contract required**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:****Agencies Using Code**

DSPD

Description:

The general purpose of the Fiscal Agent is to facilitate employee wage and benefit payments for individuals authorized to receive supports and services under the DSPD Parent Managed Family Support mode. The contractor acts as the Fiscal Agent to distribute funds for family support services between the Division, the fiscal intermediary, and the Family Support employee/s of the parents. The Fiscal Agent assists the Division in fulfilling the payroll and tax functions for employees of Parent Household Employer's. The Fiscal Agent may also distribute funds to other community supports who deliver supports and services to the family.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Month	\$30.00
Personal Need	\$28.50
Session	\$985.00

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Session	\$985.00
Personal Need	\$3.50

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Session	Review	05/01/2001	\$985.00	05/01/2001
Personal Need	Review	09/20/2001	\$3.50	09/19/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: FS1

Service Name: Family Support Own Home Model (Parent Managed Services)

Creation Date: 1/25/2001

Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required

Residential: No

Agencies Using Code

DSPD

Description:

Family support provides direct support designed to increase the capabilities of families to care for their family member with disabilities in their natural home setting. Support is offered in one or more of the following areas: developmental programming to assist in the acquisition of self care, communication, mobility, and social skills; behavior management techniques, specialized intervention for dealing with unique health needs of the individual; and any other training or assistance which enables the family to maintain the person with disabilities at home and contribute to his/her growth and well being. The parent managed service model provides the parent the opportunity to hire the employees under a Fiscal Agent Model.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$2.82

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: FS3
Service Name: Family Support Service Provider
Model-Disability Specialist

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

A professional consultant with a bachelor's degree or equivalent provides support to the individual with disabilities or those who provide care to individuals in order for the individual to achieve their potential.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$4.62

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Quarter hour	\$5.05

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Quarter hour	Initial Review	06/01/1991	\$4.66	07/01/2000
Quarter hour	COLA	08/09/2001	\$4.83	07/01/2001
Quarter hour	COLA	07/10/2002	\$5.05	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and

Staff to Client Ratios

Staff to client ratio is 1:1.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1, 6 and 7D

Rule R539-7-1

Policy 2-8 pertaining to Family Assistance and Support

Tx/Serv Requirement

Family Assistance and Support serves the purpose of enabling the family member with a disability, which so desires, to remain in and be supported in the family home. Family Supports are intended to support both the family member with a disability and the rest of the family to live as much like other families as possible with the intent of preventing or delaying unwanted out of home placement.

Family Assistance and Support can be provided either in or out of the home to an individual and his/her family. These supports may include provisions to accommodate the individual's disability in accessing supports offered in the community, providing instructions, and supervision and training to the family/care giver/individual in all areas of daily living. The supports may also include other activities that are identified in the individual's support plan as necessary for continued skill development. Skill development supports may include: (a) developing interventions to cope with problems or unique situations that may occur within the complexity of the family, (b) techniques of behavior supports, (c) enrollment in special summer programs, (d) social skills development, (e) appropriate leisure time activities, and (f) instruction and consultation for the individual with disabilities, the parent and/or siblings.

All waiver services available to individuals living in a community living arrangement are available to individuals remaining in and receiving waiver services in the family home.

Families may receive services through a provider who has a contract with the State to provide family support services or they may choose the "family choice model" in which the family hires and trains the employees to provide the supports. In the family choice model, the family may use individuals age 16 and older as direct providers of supports. The family choice model requires the family to use an Fiscal Intermediary Service Organization to assist them with managing the financial business and paperwork associated with the family choice model.

Limitations: Family Assistance and Support is available to individuals under age 22. Comparable services are available to individuals over 22 through Community Living Supports.

Staff Requirements

Staffing requirements are established in the individual's plan.

Service Code: FS4
Service Name: Family Support Service Provider
Model-Behavior Analyst

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

A professional consultant with a master's degree or equivalent provides support to the individual with disabilities or those who provide care to individuals in order for the individual to achieve their potential.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$7.71

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Quarter hour	\$8.38

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Quarter hour	Initial Review	06/01/1991	\$7.74	07/01/2000
Quarter hour	COLA	08/09/2001	\$8.03	07/01/2001
Quarter hour	COLA	07/10/2002	\$8.38	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and

Staff to Client Ratios

Staff to client ratio is 1:1.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1, 6 and 7D

Rule R539-7-1

Policy 2-8 pertaining to Family Assistance and Support

Tx/Serv Requirement

Family Assistance and Support serves the purpose of enabling the family member with a disability, which so desires, to remain in and be supported in the family home. Family Supports are intended to support both the family member with a disability and the rest of the family to live as much like other families as possible with the intent of preventing or delaying unwanted out of home placement.

Family Assistance and Support can be provided either in or out of the home to an individual and his/her family. These supports may include provisions to accommodate the individual's disability in accessing supports offered in the community, providing instructions, and supervision and training to the family/care giver/individual in all areas of daily living. The supports may also include other activities that are identified in the individual's support plan as necessary for continued skill development. Skill development supports may include: (a) developing interventions to cope with problems or unique situations that may occur within the complexity of the family, (b) techniques of behavior supports, (c) enrollment in special summer programs, (d) social skills development, (e) appropriate leisure time activities, and (f) instruction and consultation for the individual with disabilities, the parent and/or siblings.

All waiver services available to individuals living in a community living arrangement are available to individuals remaining in and receiving waiver services in the family home.

Families may receive services through a provider who has a contract with the State to provide family support services or they may choose the "family choice model" in which the family hires and trains the employees to provide the supports. In the family choice model, the family may use individuals age 16 and older as direct providers of supports. The family choice model requires the family to use an Fiscal Intermediary Service Organization to assist them with managing the financial business and paperwork associated with the family choice model.

Limitations: Family Assistance and Support is available to individuals under age 22. Comparable services are available to individuals over 22 through Community Living Supports.

Staff Requirements

Staffing requirements are established in the individual's plan.

Service Code: FSV
Service Name: Family Assistance Individualized Rate-Center Purchases

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: No contract allowed for this service
Residential: No

Agencies Using Code
 DSPD

Description:

Various items needed to support individuals to live in their family home setting. Items may include classes to train parents, and/or funding to buy or repair equipment/personal items.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$2,000.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
MR	MR/DD
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: FTP
Service Name: DCFS: Family Transportation Payment-Non Medical Mileage. DSPD: Transportation Supports/Per Mile

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: No contract allowed for this service
Residential: No

Agencies Using Code

DCFS
 DSPD

Description:

DCFS

Payments made to Foster Parents to cover the cost of transporting Foster Care youth to and from activities which are included in the service plan. These activities may include medical, dental, and mental health appointment if the child is not medicaid eligible.

The requested daily rate of \$8.70 is a negotiated rate used in a sole source contract for a child in DCFS custody placed in California and is the cost to transport the child to and from school, daily. It is based on actual charges out of state. The provider must pay to have a child in DCFS custody transported daily to and from and off site school.

DSPD

Transportation supports serve the purpose of allowing the person access to other supports necessary to live an inclusive community life. They are only provided as independent services when transportation is not otherwise available as an element of another service. The need for transportation must be documented as necessary to fulfill other identified support in the Individual Service Plan and the associated documents. Transportation Supports / per mile will pay the MAR established \$.32 cents per mile rate for transportation approved under the individual's Individual Support Plan.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$8.70
Mile	\$0.31
Trip or Ticket	\$999.00
Month	\$999.99

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Mile	\$0.36

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Mile	Initial Review	07/01/1999	\$0.32	07/01/2000
Mile	COLA	08/09/2001	\$0.34	07/01/2001
Mile	COLA	07/10/2002	\$0.36	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
FB	CHILD WELFARE NON IV-E
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to transportation as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention.

Staff to Client Ratios

N/A

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedure 6E

Rule R539-8-4

Policy 2-8 pertaining to Transportation Supports

Tx/Serv Requirement

Transportation Supports are only provided as independent waiver services when transportation is not otherwise available as an element of another waiver service. The need for transportation must be documented as necessary to fulfill other identified supports in the individual support plan and the associated outcomes.

Transportation (codes MTP and RTS) are for services provided to individuals who are attending a day training, prevocational service, or supported employment. Transportation is provided to and from the individual's own home or residential site by the day training provider or from their residential site by the residential provider to the day training, prevocational service or supported employment location.

Transportation in a private vehicle will be reimbursed at the FTP mileage rate. Individuals providing the service must have a valid Utah Driver License and liability insurance as required by state law. This transportation option must be pre approved by the regional director.

Limitations: Medicaid payment for transportation under the approved waiver plan is not available through medical transportation, transportation available through the State plan, transportation that is available at no charge, or as part of administrative expenditures. Additional transportation supports will not be available to residential or day support providers contracted to provide transportation to and from the person's residence to the site(s) of a day support when payment for transportation is included in the established rate paid to the community living or day support provider.

Staff Requirements

Staffing requirements are established in the individual worksheets.

Service Code: HAP
Service Name: Community Based Housing Allowance Program

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: No contract allowed for this service
Residential: No

Agencies Using Code
 DSPD

Description:

To assist individuals participating in Division residential programs to meet the housing costs attributable to the acquisition, retention, use, and occupancy of a personal home or community residential living in the community. The Division will provide a monthly rental allowance based upon the amount indicated on the Community-Based Housing Allowance application. This program is a Human Services' State Agency Grant and is not counted as income towards the individual's benefits.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Month	\$408.75
Personal Need	\$4,905.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID

Service Code

Client Assessment/Tx Plan
 N/A

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to community living residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals receiving Community Living Residential or Residential Supports who provide documentation of their application to their local housing authority.

Record Keeping

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention. Records of rental payments must also be maintained.

Staff to Client Ratios

N/A

Staff Training

N/a

Tx/Serv Requirement

The Division provides monthly rental allowance based upon the amount indicated on the Community Based Housing Allowance Application. The Community - Based Housing Assistance program assists individuals participating in Division of Services for People with Disabilities residential programs to meet the housing costs attributable to the acquisition, retention, use, and occupancy of a personal home or Community Residential Living arrangements in the community. This program is to assist the individual/ provider in meeting rent shortfalls. The Community-Based Housing Assistance program is a Human Services State Agency Grant and is, as such, not counted as income towards the individual's benefits. This service is based upon budget constraints. The Housing Assistance

form must be done on all individuals to determine housing costs even if additional housing allowance is not required. The HAP payment is not part of the person's budget and must be released back to the Region when community housing assistance becomes available. The relinquished HAP funds will be used for an individual on the HAP waiting list.

Staff Requirements

N/A

Service Code: HHS**Service Name: Host Home Supports****Contract Type:** Open or non-fixed dollar amount contract required**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:****Agencies Using Code**

DSPD

Description:

Host Home Supports are designed to assist an individual in gaining and/or maintaining skills to live as independently as possible in a community home like setting, and based on the outcome for community living indicated in the individual's support plan, live in a one to two person host home setting they choose. The individual's support plan identifies the type, frequency and amount of support required by the person based on their preferences. Supports can include up to 24 hours of supervision but the actual hours of direct care staff support will be indicated in the individual's support plan. Host Homes primarily serve adults with disabilities 19 years of age and older who desire to live in a private residence. The individual's level of support will be based upon an individualized support plan and transferred to a Host Home Worksheet to determine the specific daily rate for the individual.

USSDS Rates as of**Unit**

Daily

Rate

\$206.57

Service Eligibility**Eligibility**

SG

SM

Description

SELF DETERM NON-MEDICAID

SELF DETERM MEDICAID

Service Code: HSQ

Creation Date: 1/25/2001

Service Name: Homemaker Services

Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required

Agencies Using Code

Residential: No

DSPD

Description:

Services consisting of general household activities (meal preparation and routine household care) provided by a trained homemaker when the individual regularly responsible for these activities is temporarily absent or unable to manage the home and care for him or herself or others in the home. These services must not be available under the state plan.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$3.60

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to chore and homemaker services as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan .

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1 hourly based on the individual's plan.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule: Policy 2-8 pertaining to Chore and Homemaker Supports

Tx/Serv Requirement

Chore and Homemaker supports serve the purpose of maintaining a clean, sanitary and safe living environment in the person's residence.

Chore and Homemaker supports consist of heavy household chores such as snow removal, scrubbing floors. Carpets, furniture, windows, and walls or moving heavy items of furniture. The service also includes general household activities when the individual usually responsible for the general household activities is absent or needs assistance.

Chore and Homemaker supports may be provided by individuals over the age of 16 who are physically able to complete such activities.

Staff Requirements

Staffing requirements are established in the individual's plan.

Service Code: LGC
Service Name: Limited Guardianship Case Management
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

A monthly case management for individuals who are under guardianship through a contracted limited corporate guardianship provider. These individuals, with severe disabilities, reside in community residential placements, or at the Utah State Developmental Center. They require monthly guardianship case management services to ensure informed consent for medical and habilitative issues. This service will be billed on a monthly basis at an established average monthly fee.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$71.37

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
DC	DEVELOPMENTAL CENTER
SG	SELF DETERM NON-MEDICAID

Service Code: LGF**Creation Date:** 1/25/2001**Service Name:** Limited Guardianship Court Filing Fees**Obsolete Date:****Contract Type:** Open or non-fixed dollar amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

The division has contracted with providers to process and/or provide limited corporate guardianships to ensure informed consent for medical and habilitative issues for consumers living in community residential placements and at the Utah State Developmental Center. Two types of Limited Guardianship Court Filing Fees are required in order to obtain and maintain guardianship. The initial court costs (LGF - need) are comprised of attorney fees, court filing fees and document preparation fees. The annual court filing fees (LGF - session) is comprised of annual accounting court filing cost to the court.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$51.00
Personal Need	\$470.00
Month	\$1,260.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
DC	DEVELOPMENTAL CENTER
SG	SELF DETERM NON-MEDICAID

Service Code: LKS**Service Name: Latch Key Services****Contract Type:** No contract allowed for this service**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:****Agencies Using Code**

DSPD

Description:

Latch Key Services: supervision is provided to children with disabilities 13 years of age and older who are eligible for Division services, who are living with family, and whose parents are working or going to school. Latch Key services may be provided only when no other education or child care programs are available. Latch Key services shall be provided through licensed or certified Department of Human Services Child Care Providers. Latch Key providers will provide child care services under an individualized support plan. The Latch Key code will be used for DSPD Child Care services provided to children with disabilities 12 years of age or younger who are eligible for Division services, who are living with family, and whose parents are working or going to school. Child Care services will be funded only under Division general funds. Child Care will reimburse only for the difference between what the Child Care Center would typically charge the parent for child care services and the supplementary funds needed to meet the additional treatment / staffing needs documented in the Family Centered Plan.

USSDS Rates as of**Unit**

Hourly

Rate

\$7.83

Service Eligibility**Eligibility**

SG

SM

Description

SELF DETERM NON-MEDICAID

SELF DETERM MEDICAID

Service Code: MAG
Service Name: Older Adult Assistance
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
DSPD

Description:

Payments made on a monthly basis to families of individuals with disabilities to provide services to enhance the individual's quality of life and assist the family in maintaining the individual in the family home.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Month	\$170.67
Personal Need	\$2,000.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
MR	MR/DD
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code: MRE
Service Name: Mental Retardation Evaluation
Contract Type: Closed or fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
DSPD

Description:

The Mental Retardation Evaluation code is used for payment of individuals who are referred to DSPD Contracted Medical Clinics for Medication and/or psychiatric/Behavioral Evaluations.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$150.00
Month	\$4,333.33
Hourly	\$0.00
Personal Need	\$0.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
MR	MR/DD

Service Code: MTP**Creation Date: 1/25/2001****Service Name: Transportation Service****Obsolete Date:****Contract Type:** Either a non-fixed or fixed amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

Transportation services are provided to individuals who are attending a day training, prevocational service, or supported employment. Transportation services are provided to and from the individual's own home or residential site by the day training provider.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$7.55

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$8.93

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	07/01/1993	\$8.25	07/01/2000
Daily	COLA	08/09/2001	\$8.55	07/01/2001
Daily	COLA	07/11/2002	\$8.93	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to transportation as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and

Staff to Client Ratios

N/A

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedure 6E

Rule R539-8-4

Policy 2-8 pertaining to Transportation Supports

Tx/Serv Requirement

Transportation Supports are only provided as independent waiver services when transportation is not otherwise available as an element of another waiver service. The need for transportation must be documented as necessary to fulfill other identified supports in the individual support plan and the associated outcomes.

Transportation (codes MTP and RTS) are for services provided to individuals who are attending a day training, prevocational service, or supported employment. Transportation is provided to and from the individual's own home or residential site by the day training provider or from their residential site by the residential provider to the day training, prevocational service or supported employment location.

Transportation in a private vehicle will be reimbursed at the FTP mileage rate. Individuals providing the service must have a valid Utah Driver License and liability insurance as required by state law. This transportation option must be pre approved by the regional director.

Limitations: Medicaid payment for transportation under the approved waiver plan is not available through medical transportation, transportation available through the State plan, transportation that is available at no charge, or as part of administrative expenditures. Additional transportation supports will not be available to residential or day support providers contracted to provide transportation to and from the person's residence to the site(s) of a day support when payment for transportation is included in the established rate paid to the community living or day support provider.

Staff Requirements

Staffing requirements are established in the individual worksheets.

Service Code: P5A

Service Name: Professional Parent Home Level 5-Medical

Contract Type: Open or non-fixed dollar amount contract required

Residential: No

Creation Date: 1/25/2001

Obsolete Date: 07/01/2001

Agencies Using Code

DSPD

Description:

Professional Parent homes provide opportunities for individuals with disabilities to live in homes with one or two other individuals with disabilities. Professional parents are trained to provide residential services to children who meet DSPD's eligibility requirements and require a less restrictive setting in order to maximize independence and self-sufficiency. Therapeutic trained staff augment specialized services provided by Physician, Registered Nurse, Physical Therapist or other medical professional to meet the individuals identified needs. This service code is for individuals in need of level 5 care. In order for an individual to receive funding at the P5 level he/she requires a ICAP service score indicating a level 5 rate.

USSDS Rates as of

Unit

Rate

Service Code: P5B

Service Name: Professional Parent Home Level 5-Behavior

Contract Type: Open or non-fixed dollar amount contract required

Residential: No

Creation Date: 1/25/2001

Obsolete Date: 07/01/2001

Agencies Using Code

DSPD

Description:

Professional Parent homes provide opportunities for individuals with disabilities to live in homes with one or two other individuals with disabilities. Professional parents are trained to provide residential services to children who meet DSPD's eligibility requirements and require a less restrictive setting in order to maximize independence and self-sufficiency. Therapeutic trained staff augment specialized services provided by Psychologist, Behavior Specialist or other needed personnel to meet the individuals identified needs. This service code is for individuals in need of level 5 care. In order for an individual to receive funding at the P5 level he/she requires a ICAP service score indicating a level 5 rate.

USSDS Rates as of

Unit

Rate

Service Code: P5C
Service Name: Professional Parent Home Level 5-Prior
Contract Type: Either a non-fixed or fixed amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
DSPD

Description:

Professional Parent homes provide opportunities for individuals with disabilities to live in homes with one or two other individuals with disabilities. Professional parents are trained to provide residential services to children who meet DSPD's eligibility requirements and require a less restrictive setting in order to maximize independence and self-sufficiency. Therapeutic trained staff augment specialized services to meet the individuals identified needs. The Case Manager must obtain Division approval prior to implementation of this rate. This service code is for individuals in need of intensive level 5 care. In order for an individual to receive funding at the P5 level he/she requires a ICAP service score indicating a level 5 rate and a completed Individualized level 5 Worksheet.

A fixed contract is required for an amount over the USSDS rate ceiling.

USSDS Rates as of

Unit

Rate

Service Code: PAC
Service Name: Personal Assistance/Care Services Program
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Hands on care, of both a medical and non-medical supportive nature, specific to the needs of a medically stable, physically handicapped individual. This service may include skilled medical care and health maintenance to the extent permitted by State law and certified by the recipient's physician. Housekeeping, chore services, and other reasonable and necessary activities which are incidental to the performance to the client based care may also be furnished as part of this activity. Personal assistance services are provided on a regularly scheduled basis and are available to individuals who live along, with roommates, a spouse or children. Services may be provided in the recipient's place of residence or in settings outside the place of residence.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Month	\$5,248.87
Quarter hour	\$2.66
Hourly	\$10.63

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: PAP
Service Name: Consumer Preparation Services
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Services designed to ensure that individuals receiving supports through the Personal Assistance Services program are prepared to supervise and direct their personal assistance services. The need for and type of Consumer Preparation Services will vary depending upon the nature of the recipients disability and his/her experience in directing and supervising personal attendants. CPS will be provided by qualified agencies under contract with DSPD. Services may include instruction in methods of identifying personal needs and effectively communicating those needs to service provider; Instructions in the management of personal attendants; Instructions in addressing problems. Individuals providing this service typically will have at least a high school education with experience. College graduate with experience preferred.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$5.00
Personal Need	\$20.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM

Service Code: PAS
Service Name: OBRA Evaluation Payment
Contract Type: Closed or fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
DSPD

Description:
The OBRA evaluation Code, PAS, is used to pay for the Division's OBRA specialist initial PASSR nursing evaluation.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$376.33
Hourly	\$92.16

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
MR	MR/DD

Service Code: PER
Service Name: Personal Emergency Response System
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Personal Emergency Response System (PER) is an electronic device that enables individuals at high risk of institutionalization to secure help in the event of an emergency. The system is connected to the individuals phone and programmed to signal a response center once a "help" button is activated. the response center is staffed by trained professionals. The PER system is limited to those individuals who live alone or live with others who are unable to respond to an emergency, or who are alone with no regular caretaker for extended periods of time, and who would otherwise require extended routine supervision.
 Need: Actual costs up to a maximum of \$275.91 for a one time purchase of PER equipment when such purchase does not duplicate monthly rental fees.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Month	\$38.66
Personal Need	\$275.91

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: PP1
Service Name: Professional Parent Home Level 1
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
DSPD

Description:

Professional Parent homes provide opportunities for individuals with disabilities to live in homes with one or two other individuals with disabilities. Professional parents are trained to provide residential services to children who meet DSPD's eligibility requirements and require a less restrictive setting in order to maximize independence and self-sufficiency. The level of service intensity is decided by ICAP. This service code is for individuals in need of level 1 care.

USSDS Rates as of

Unit

Rate

Service Code: PP2
Service Name: Professional Parent Home Level 2
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
DSPD

Description:

Professional Parent homes provide opportunities for individuals with disabilities to live in homes with one or two other individuals with disabilities. Professional parents are trained to provide residential services to children who meet DSPD's eligibility requirements and require a less restrictive setting in order to maximize independence and self-sufficiency. The level of service intensity is decided by ICAP. This service code is for individuals in need of level 2 care.

USSDS Rates as of

Unit

Rate

Service Code: PP3
Service Name: Professional Parent Home Level 3
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Professional Parent homes provide opportunities for individuals with disabilities to live in homes with one or two other individuals with disabilities. Professional parents are trained to provide residential services to children who meet DSPD's eligibility requirements and require a less restrictive setting in order to maximize independence and self-sufficiency. The level of service intensity is decided by ICAP. This service code is for individuals in need of level 3 care.

USSDS Rates as of

Unit

Rate

Service Code: PP4
Service Name: Professional Parent Home Level 4
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
DSPD

Description:

Professional Parent homes provide opportunities for individuals with disabilities to live in homes with one or two other individuals with disabilities. Professional parents are trained to provide residential services to children who meet DSPD's eligibility requirements and require a less restrictive setting in order to maximize independence and self-sufficiency. The level of service intensity is based on the consumer's ICAP score. This service code is for individuals in need of level 4 care.

USSDS Rates as of

Unit

Rate

Service Code: PPS

Creation Date: 1/25/2001

Service Name: Professional Parent Supports

Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required

Agencies Using Code

Residential: No

DSPD

Description:

Professional Parent Supports are designed to assist an individual gain and/or maintain skills to live as independently as possible in a community home like setting, and based on the outcome for community living indicated in the individual's support plan, live in a one to two person professional parent setting they choose. The individual's support plan identifies the type, frequency and amount of support required by the person based on their preferences. Supports can include up to 24 hours of supervision but the actual hours of direct care staff support will be indicated in the individual's support plan. Professional parents primarily serve children with disabilities under 18 years of age in private residences. The individual's level of support will be based upon an individualized support plan and transferred to a Professional Parent Worksheet to determine the specific daily rate for the individual.

USSDS Rates as of

Unit

Rate

Daily

\$206.57

Service Eligibility

Eligibility

Description

SG

SELF DETERM NON-MEDICAID

SM

SELF DETERM MEDICAID

Service Code: R1A
Service Name: Residential Services Level 1 Base Rate
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Residential services that provide training in daily living, home management, and social skills: money management; community access; behavioral management; leisure time management; and personal health maintenance and hygiene. The reimbursement rates vary depending upon the individual's ICAP service score. This code is for individuals who are in need of level 1 care.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily \$50.18

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$46.33	07/01/2000
Daily	COLA	08/09/2001	\$48.06	07/01/2001
Daily	COLA	07/11/2002	\$50.18	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

Residential services include skills training in daily living, home management, and social skills: money management, community access; behavioral management; leisure time management; and personal health maintenance and hygiene. The reimbursement rates vary depending upon the individual's service score. Typically a group home is a single residence (home) in which four (4) to eight (8) individuals with disabilities reside. A Supported Apartment or mini group home setting is three (3) or less individuals.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R1B
Service Name: Residential Services Level 1 Medical Supervision

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes all the services described within the basic rate. In addition, a Medical Supervision Adjustment has been added to the Basic Rate to assist providers in funding an additional Licensed Health Care Professional to provide daily nursing services to those individuals whose disabilities meet the qualifying condition found on the Medical Adjustment Worksheet.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$68.75

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$63.47	07/01/2000
Daily	COLA	08/09/2001	\$65.84	07/01/2001
Daily	COLA	07/11/2002	\$68.75	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
Policy 2-7 Provider Training and Personnel Requirements
Rule R539-8-5
Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

This residential service includes all the services described within the basic community residential living rate. In addition, a Medical Supervision Adjustment has been added to the Basic Rate to assist providers in funding an additional Licensed Health Care Professional to provide daily nursing services to those individuals whose disabilities meet the qualifying condition.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R1C
Service Name: Residential Services Level 1 Health Supports

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes all the services described within the basic rate. In addition, a Health Supports Adjustment has been added to the basic rate to assist providers in funding additional aide time to provide daily assistance to individuals who require a wheelchair for mobility and need continuous physical assistance for bathing, dressing, and transfers. To qualify for this adjustment, the individual must meet the qualifying conditions found on the Medical Adjustment Worksheet.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily

\$64.45

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$59.51	07/01/2000
Daily	COLA	08/09/2001	\$61.73	07/01/2001
Daily	COLA	07/11/2002	\$64.45	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

This residential service includes all the services described within the basic community residential living rate. In addition, a Health Supports Adjustment has been added to the Basic Rate to assist providers in funding additional aide time to provide daily assistance to individuals who require a wheelchair for mobility and need continuous physical assistance for bathing, dressing, and transfers. To qualify for this adjustment the individual must meet qualifying conditions.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R1D
Service Name: Residential Services, Level 1 Medical & Health Supports

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes the Basic services plus both the Medical Supervision and the Health Support services. Individuals must meet the qualifying conditions found on the Medical Adjustment Worksheet.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily

\$83.02

BCM Rate Actions

Unit

Action

Action Date

New Rate

Effective Date

Daily

Initial Review

12/01/1990

\$76.65

07/01/2000

Daily

COLA

08/09/2001

\$79.51

07/01/2001

Daily

COLA

07/11/2002

\$83.02

07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

This residential service includes the basic community residential living rate plus both of the above Medical Supervision and Health Support services. Individuals must meet the qualifying conditions.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet

Service Code: R2A
Service Name: Residential Services Level 2 Base Rate
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Residential services that provide training in daily living, home management, and social skills: money management; community access; behavioral management; leisure time management; and personal health maintenance and hygiene. The reimbursement rates vary depending upon the individual's ICAP service score. This code is for individuals who are in need of level 2 care.

USSDS Rates as of
Unit

Rate**BCM Maximum Allowable Rate (MAR)****Unit****MAR Rate**

Daily

\$68.30

BCM Rate Actions**Unit****Action****Action Date****New Rate****Effective Date**

Daily

Initial Review

12/01/1990

\$63.06

07/01/2000

Daily

COLA

08/09/2001

\$65.41

07/01/2001

Daily

COLA

07/11/2002

\$68.30

07/01/2002

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

Residential services include skills training in daily living, home management, and social skills: money management, community access; behavioral management; leisure time management; and personal health maintenance and hygiene. The reimbursement rates vary depending upon the individual's service score. Typically a group home is a single residence (home) in which four (4) to eight (8) individuals with disabilities reside. A Supported Apartment or mini group home setting is three (3) or less individuals.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R2B
Service Name: Residential Services Level 2 Medical Supervision

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes all the services described within the basic level 2 rate. In addition, a Medical Supervision Adjustment has been added to the Basic Rate to assist providers in funding an additional Licensed Health Care Professional to provide daily nursing services to those individuals whose disabilities meet the qualifying condition found on the Medical Adjustment Worksheet.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$86.87

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$80.20	07/01/2000
Daily	COLA	08/09/2001	\$83.19	07/01/2001
Daily	COLA	07/11/2002	\$86.87	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
Policy 2-7 Provider Training and Personnel Requirements
Rule R539-8-5
Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

This residential service includes all the services described within the basic community residential living rate. In addition, a Medical Supervision Adjustment has been added to the Basic Rate to assist providers in funding an additional Licensed Health Care Professional to provide daily nursing services to those individuals whose disabilities meet the qualifying condition.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R2C
Service Name: Residential Services Level 2 Health Supports

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes all the services described within the basic level 2 rate. In addition, a Health Supports Adjustment has been added to the basic rate to assist providers in funding additional aide time to provide daily assistance to individuals who require a wheelchair for mobility and need continuous physical assistance for bathing, dressing, and transfers. To qualify for this adjustment, the individual must meet the qualifying conditions found on the Medical Adjustment Worksheet.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily

\$82.58

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$76.24	07/01/2000
Daily	COLA	08/09/2001	\$79.08	07/01/2001
Daily	COLA	07/11/2002	\$82.58	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

This residential service includes all the services described within the basic community residential living rate. In addition, a Health Supports Adjustment has been added to the Basic Rate to assist providers in funding additional aide time to provide daily assistance to individuals who require a wheelchair for mobility and need continuous physical assistance for bathing, dressing, and transfers. To qualify for this adjustment the individual must meet qualifying conditions.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R2D
Service Name: Residential Services Level 2 Medical + Health Supports

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes the Basic level 2 services plus both the Medical Supervision and the Health Support services. Individuals must meet the qualifying conditions found on the Medical Adjustment Worksheet.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily

\$101.15

BCM Rate Actions

Unit

Action

Action Date

New Rate

Effective Date

Daily

Initial Review

12/01/1990

\$93.38

07/01/2000

Daily

COLA

08/09/2001

\$96.87

07/01/2001

Daily

COLA

07/11/2002

\$101.15

07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

This residential service includes the basic community residential living rate plus both of the above Medical Supervision and Health Support services. Individuals must meet the qualifying conditions.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet

Service Code: R3A
Service Name: Residential Services Level 3 Base Rate
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Residential services that provide training in daily living, home management, and social skills: money management; community access; behavioral management; leisure time management; and personal health maintenance and hygiene. The reimbursement rates vary depending upon the individual's ICAP service score. This code is for individuals who are in need of level 3 care.

USSDS Rates as of

Unit **Rate**

BCM Maximum Allowable Rate (MAR)

Unit **MAR Rate**
 Daily \$86.42

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$79.78	07/01/2000
Daily	COLA	08/09/2001	\$82.76	07/01/2001
Daily	COLA	07/11/2002	\$86.42	07/01/2002

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

Residential services include skills training in daily living, home management, and social skills: money management, community access; behavioral management; leisure time management; and personal health maintenance and hygiene. The reimbursement rates vary depending upon the individual's service score. Typically a group home is a single residence (home) in which four (4) to eight (8) individuals with disabilities reside. A Supported Apartment or mini group home setting is three (3) or less individuals.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R3B
Service Name: Residential Services Level 3 Medical Supervision

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes all the services described within the basic level 3 rate. In addition, a Medical Supervision Adjustment has been added to the Basic Rate to assist providers in funding an additional Licensed Health Care Professional to provide daily nursing services to those individuals whose disabilities meet the qualifying condition found on the Medical Adjustment Worksheet.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$104.99

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$96.93	07/01/2000
Daily	COLA	08/09/2001	\$100.54	07/01/2001
Daily	COLA	07/11/2002	\$104.99	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
Policy 2-7 Provider Training and Personnel Requirements
Rule R539-8-5
Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

This residential service includes all the services described within the basic community residential living rate. In addition, a Medical Supervision Adjustment has been added to the Basic Rate to assist providers in funding an additional Licensed Health Care Professional to provide daily nursing services to those individuals whose disabilities meet the qualifying condition.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R3C
Service Name: Residential Services Level 3 Health Supports

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes all the services described within the basic level 3 rate. In addition, a Health Supports Adjustment has been added to the basic rate to assist providers in funding additional aide time to provide daily assistance to individuals who require a wheelchair for mobility and need continuous physical assistance for bathing, dressing, and transfers. To qualify for this adjustment, the individual must meet the qualifying conditions found on the Medical Adjustment Worksheet.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily

\$100.69

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$92.97	07/01/2000
Daily	COLA	08/09/2001	\$96.43	07/01/2001
Daily	COLA	07/11/2002	\$100.69	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

This residential service includes all the services described within the basic community residential living rate. In addition, a Health Supports Adjustment has been added to the Basic Rate to assist providers in funding additional aide time to provide daily assistance to individuals who require a wheelchair for mobility and need continuous physical assistance for bathing, dressing, and transfers. To qualify for this adjustment the individual must meet qualifying conditions.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R3D
Service Name: Residential Services Level 3 Medical + Health Supports

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes the Basic level 3 services plus both the Medical Supervision and the Health Support services. Individuals must meet the qualifying conditions found on the Medical Adjustment Worksheet.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily

\$119.26

BCM Rate Actions

Unit

Action

Action Date

New Rate

Effective Date

Daily

Initial Review

12/01/1990

\$110.11

07/01/2000

Daily

COLA

08/09/2001

\$114.22

07/01/2001

Daily

COLA

07/11/2002

\$119.26

07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

This residential service includes the basic community residential living rate plus both of the above Medical Supervision and Health Support services. Individuals must meet the qualifying conditions.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet

Service Code: R4A
Service Name: Residential Services Level 4 Base Rate
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Residential services that provide training in daily living, home management, and social skills: money management; community access; behavioral management; leisure time management; and personal health maintenance and hygiene. The reimbursement rates vary depending upon the individual's ICAP service score. This code is for individuals who are in need of level 4 care.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily

\$104.54

BCM Rate Actions

Unit

Action

Action Date

New Rate

Effective Date

Daily

Initial Review

12/01/1990

\$96.51

07/01/2000

Daily

COLA

08/09/2001

\$100.11

07/01/2001

Daily

COLA

07/11/2002

\$104.54

07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

Residential services include skills training in daily living, home management, and social skills: money management, community access; behavioral management; leisure time management; and personal health maintenance and hygiene. The reimbursement rates vary depending upon the individual's service score. Typically a group home is a single residence (home) in which four (4) to eight (8) individuals with disabilities reside. A Supported Apartment or mini group home setting is three (3) or less individuals.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R4B
Service Name: Residential Services Level 4 Medical Supervision

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes all the services described within the basic level 4 rate. In addition, a Medical Supervision Adjustment has been added to the Basic Rate to assist providers in funding an additional Licensed Health Care Professional to provide daily nursing services to those individuals whose disabilities meet the qualifying condition found on the Medical Adjustment Worksheet.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$123.11

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$113.66	07/01/2000
Daily	COLA	08/09/2001	\$117.90	07/01/2001
Daily	COLA	07/11/2002	\$123.11	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
Policy 2-7 Provider Training and Personnel Requirements
Rule R539-8-5
Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

This residential service includes all the services described within the basic community residential living rate. In addition, a Medical Supervision Adjustment has been added to the Basic Rate to assist providers in funding an additional Licensed Health Care Professional to provide daily nursing services to those individuals whose disabilities meet the qualifying condition.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R4C
Service Name: Residential Services Level 4 Health Supports

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes all the services described within the basic level 4 rate. In addition, a Health Supports Adjustment has been added to the basic rate to assist providers in funding additional aide time to provide daily assistance to individuals who require a wheelchair for mobility and need continuous physical assistance for bathing, dressing, and transfers. To qualify for this adjustment, the individual must meet the qualifying conditions found on the Medical Adjustment Worksheet.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Daily

\$118.81

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$109.69	07/01/2000
Daily	COLA	08/09/2001	\$113.79	07/01/2001
Daily	COLA	07/11/2002	\$118.81	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

This residential service includes all the services described within the basic community residential living rate. In addition, a Health Supports Adjustment has been added to the Basic Rate to assist providers in funding additional aide time to provide daily assistance to individuals who require a wheelchair for mobility and need continuous physical assistance for bathing, dressing, and transfers. To qualify for this adjustment the individual must meet qualifying conditions.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: R4D
Service Name: Residential Services Level 4 Medical + Health Supports

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This residential service includes the Basic level 4 services plus both the Medical Supervision and the Health Support services. Individuals must meet the qualifying conditions found on the Medical Adjustment Worksheet.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$137.38

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	12/01/1990	\$126.84	07/01/2000
Daily	COLA	08/09/2001	\$131.57	07/01/2001
Daily	COLA	07/11/2002	\$137.38	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

This residential service includes the basic community residential living rate plus both of the above Medical Supervision and Health Support services. Individuals must meet the qualifying conditions.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet

Service Code: R5A
Service Name: Residential Services Level 5 Medical
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

This level of residential service is provided to individuals whose ICAP service and maladaptive score indicates a level five (5) medical rate. The level of service provided is individualized on the DSPD Individualized Level 5 Worksheet. This may include a Physician, Registered Nurse, Physical Therapist or other medical professional.

USSDS Rates as of
Unit

Rate**Service Code****Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
 Policy 2-7 Provider Training and Personnel Requirements
 Rule R539-8-5
 Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

This level of residential service is provided to individuals whose ICAP service and maladaptive score indicates a level five (5) medical rate.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet

Service Code: R5B
Service Name: Residential Services Level 5 Behavioral
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

This level of residential service is provided to individuals whose ICAP service and maladaptive score indicates a level five (5) Behavioral rate. The level of service provided is individualized on the DSPD Individualized Level 5 Worksheet. Extra services may include a Psychologist, Behavior Specialist or other needed personnel.

USSDS Rates as of
Unit

Rate

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
 Policy 2-7 Provider Training and Personnel Requirements
 Rule R539-8-5
 Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

This level of residential service is provided to individuals whose ICAP service and maladaptive score indicates a level five (5) behavioral rate.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to children living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet

Service Code: R5C
Service Name: Residential Services Level 5 Severe Challenges

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001

Contract Type: Either a non-fixed or fixed amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

This level of residential service is provided to individuals whose ICAP service and maladaptive score indicates a level five (5) Severe Behavioral Challenges rate. The case manager must obtain Division approval prior to implementation of this rate. The level of services provided is individualized on the DSPD Individualized Level 5 Worksheet.

Payment of rates exceeding USSDS rate ceiling require a fixed contract.

USSDS Rates as of
Unit

Rate

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their Person Centered Plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to residential supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of support are established in the individual's Community Living Residential Worksheet (Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Provider Training and Personnel Requirements

Rule R539-8-5

Policy 2-8 pertaining to Community Living Supports

Tx/Serv Requirement

Residential services are designed to facilitate the individual's independence and promote integration into the community. Staff intervention must increase the ability of the individual to acquire, retain and/or improve skills critical to independent living.

This level of residential service living is provided to individuals whose ICAP service and maladaptive score indicates a level five (5) Severe Behavioral Challenges rate. The Support Coordinator must obtain Division approval prior to implementation of this rate. The level of services provided is individualized. Some of these individuals may qualify for the intensive supports rate due to a need for enhanced direct support salaries because of behavior consequences to self and others.

If there are questions regarding the services that are to be provided for individuals in the various rate levels, services will be defined in the individual's worksheet (see Attachment E).

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Community Living Residential Supports are listed in the Community Living Supports Worksheet (attached).

Service Code: RP1
Service Name: Parent Managed Respite Care-DSPD,
 Provider/Home based (Basic) Respite
 Care-DCFS

Creation Date: 1/26/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DCFS
 DSPD

Description:

Division of Services for People with Disabilities: The purpose of respite is to provide intermittent, time limited care to eligible individuals to enable parents/primary caretakers relief from the demand of parenting and/or living with a person with disabilities. Parent is responsible for hiring the individual who provides respite services to their child. The employees are paid under a Fiscal Agent Model.

Division of Child and Family Services: The purpose of respite is to provide intermittent, time limited relief from the day-to-day demands and parenting responsibilities for children placed in foster care. The respite will be provided in a licensed respite or foster home or by an individual in provider's home that meets DCFS Child Welfare Policy. RP1 Respite is for foster parents whose foster children are in basic care.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Hourly	\$9.92
Daily	\$58.52
Quarter hour	\$2.48

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: RP2
Service Name: Provider Facility Based Respite Care-DSPD
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Division of Services for People with Disabilities: The purpose of respite is to provide intermittent, time limited care to eligible individuals to enable parents/primary caretakers relief from the demand of parenting and/or living with a person with disabilities. Individual is provided hourly or (24 hour) respite services at the provider site. Provider has a contract with the Division/Region to provide respite services.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Hourly	\$9.64
Daily	\$60.11
Quarter hour	\$2.55

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to respite care supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1 hourly/daily and are established in the individual's plan.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
Policy 2-7 Procedure 1, 6, and 7D
Rule R539-7-2

Tx/Serv Requirement

Respite Care Supports serve the purpose of providing coverage and/or relief, on a short-term basis, for those persons who normally provide care in a home setting to an individual who is unable to care for him or herself.

Respite Care Supports includes day and overnight supports and may be provided in the following locations: (a) Individual's home or place of residence, (b) Facility approved by the State which is not a private residence, (c) Temporary care facilities and overnight camps which meet the standards set by the Division for the temporary care of people with special needs and (d) other locations as specified in the individual's support plan, in the community, which may include the private residence of the individual providing respite care, in which case the individual will meet the standards prescribed by the Medicaid enrolled respite care agency or Division Regional Office with whom they contract. In no case will more than four individuals be service by the provider at any time, including the provider's own minor children who require supervision.

Respite also covers summer camps. These camps must meet be licensed by the Department of Human Services Office of Licensing.

Limitations: The provision of respite care in terms of duration and location will be based on the annual amount allocated by the Division's Region to the individual/family and the individual/family's preference. Federal Financial Participation will not be claimed for the cost of the room and board except when provided as part of respite care in a facility approved by the State that is not the person's private residence.

See the Respite checklist included as Attachment O.

Staff Requirements

Staffing requirements are established in the individual's plan and worksheet.

Service Code: RP3
Service Name: Provider Facility Based Daily Crisis/Specialized Respite Care-DSPD

Creation Date: 1/26/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Division of Services for People with Disabilities: The purpose of respite is to provide intermittent, time limited care to eligible individuals to enable parents/primary caretakers relief from the demand of parenting and/or living with a person with disabilities. Individual is provided respite services by the provider at the parent/primary caretakers residence. Daily (24 hour) respite care is a provider facility based model for individuals with severe behavior and/or in need of crisis/specialized respite care. Determination of the use of this level of service will be made by the Regional Contract Specialist and/or Supervisor in conjunction with the Case Manager.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Hourly	\$12.20
Daily	\$79.74
Quarter hour	\$3.16

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to respite care supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1 hourly/daily and are established in the individual's plan.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedure 1, 6, and 7D

Rule R539-7-2

Policy 2-8 pertaining to Respite Care Supports and Guideline 2-8 pertaining to Respite Care Supports.

Tx/Serv Requirement

Respite Care Supports serve the purpose of providing coverage and/or relief, on a short-term basis, for those persons who normally provide care in a home setting to an individual who is unable to care for him or herself.

Respite Care Supports includes day and overnight supports and may be provided in the following locations: (a) Individual's home or place of residence, (b) Facility approved by the State which is not a private residence, (c) Temporary care facilities and overnight camps which meet the standards set by the Division for the temporary care of people with special needs and (d) other locations as specified in the individual's support plan, in the community, which may include the private residence of the individual providing respite care, in which case the individual will meet the standards prescribed by the Medicaid enrolled respite care agency or Division Regional Office with whom they contract. In no case will more than four individuals be service by the provider at any time, including the provider's own minor children who require supervision.

Respite also covers summer camps. These camps must meet be licensed by the Department of Human Services Office of Licensing.

Limitations: The provision of respite care in terms of duration and location will be based on the annual amount allocated by the Division's Region to the individual/family and the individual/family's preference. Federal Financial Participation will not be claimed for the cost of the room and board except when provided as part of respite care in a facility approved by the State that is not the person's private residence.

See the Respite checklist included as Attachment O.

Staff Requirements

Staffing requirements are established in the individual's plan and worksheet.

Service Code: RPS
Service Name: Respite Care Supports-Camps
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Respite care supports serve the purpose of providing supervision and/or relief, on a short-term basis for those individuals who normally provide care in a home setting to a person who is unable to care for himself or herself. Respite care supports include day and overnight supports provided at a camp setting which meets the Division's standards for temporary care of persons with special needs.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$360.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to respite care supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1 hourly/daily and are established in the individual's plan.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedure 1, 6, and 7D

Rule R539-7-2

Policy 2-8 pertaining to Respite Care Supports and Guideline 2-8 pertaining to Respite Care Supports.

Tx/Serv Requirement

Respite Care Supports serve the purpose of providing coverage and/or relief, on a short-term basis, for those persons who normally provide care in a home setting to an individual who is unable to care for him or herself.

Respite Care Supports includes day and overnight supports and may be provided in the following locations: (a) Individual's home or place of residence, (b) Facility approved by the State which is not a private residence, (c) Temporary care facilities and overnight camps which meet the standards set by the Division for the temporary care of people with special needs and (d) other locations as specified in the individual's support plan, in the community, which may include the private residence of the individual providing respite care, in which case the individual will meet the standards prescribed by the Medicaid enrolled respite care agency or Division Regional Office with whom they contract. In no case will more than four individuals be service by the provider at any time, including the provider's own minor children who require supervision.

Respite also covers summer camps. These camps must meet be licensed by the Department of Human Services Office of Licensing.

Limitations: The provision of respite care in terms of duration and location will be based on the annual amount allocated by the Division's Region to the individual/family and the individual/family's preference. Federal Financial Participation will not be claimed for the cost of the room and board except when provided as part of respite care in a facility approved by the State that is not the person's private residence.

Staff Requirements

Staffing requirements are established in the individual's plan and worksheet.

Service Code: RTQ
Service Name: Rehabilitation Therapies
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/26/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

Division of Services for People with Disabilities: The primary purpose of Rehabilitation Therapy services are to provide in-home services for individuals who have sustained a brain injury who would otherwise require institutionalization in a nursing facility. Rehabilitation Therapies are designed to prevent, maintain and/or minimize chronic disabilities while restoring the individual to the optimal level of physical, cognitive or functional performance and to improve the skills and adjustment of the individual. Therapies included in this service are physical, occupational or cognitive therapies to improve such functions as thinking patterns, organizational skills or memory skills. It can also include working with range of motion, feeding and swallowing; small or large motor skills; or generally improving the adjustment of the brain injured person by integrating vocational and educational goals and daily living skills.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$8.66
Hourly	\$34.65

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND

Service Code: RTS

Creation Date: 1/26/2001

Service Name: Residential Transportation Service

Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required

Agencies Using Code

Residential: No

DSPD

Description:

Transportation services are provided to individuals who are attending a day training, prevocational service, or supported employment. Transportation services are provided to and from the residential treatment center by the residential treatment provider.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$6.82

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$7.20

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	07/01/1993	\$6.65	07/01/2000
Daily	COLA	08/09/2001	\$6.90	07/01/2001
Daily	COLA	07/11/2002	\$7.20	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to transportation as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and

Staff to Client Ratios

N/A

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedure 6E

Rule R539-8-4

Policy 2-8 pertaining to Transportation Supports

Tx/Serv Requirement

Transportation Supports are only provided as independent waiver services when transportation is not otherwise available as an element of another waiver service. The need for transportation must be documented as necessary to fulfill other identified supports in the individual support plan and the associated outcomes.

Transportation (codes MTP and RTS) are for services provided to individuals who are attending a day training, prevocational service, or supported employment. Transportation is provided to and from the individual's own home or residential site by the day training provider or from their residential site by the residential provider to the day training, prevocational service or supported employment location.

Transportation in a private vehicle will be reimbursed at the FTP mileage rate. Individuals providing the service must have a valid Utah Driver License and liability insurance as required by state law. This transportation option must be pre approved by the regional director.

Limitations: Medicaid payment for transportation under the approved waiver plan is not available through medical transportation, transportation available through the State plan, transportation that is available at no charge, or as part of administrative expenditures. Additional transportation supports will not be available to residential or day support providers contracted to provide transportation to and from the person's residence to the site(s) of a day support when payment for transportation is included in the established rate paid to the community living or day support provider.

Staff Requirements

Staffing requirements are established in the individual worksheets.

Service Code: SCL**Creation Date: 5/10/2001****Service Name: Support Coordination Liaison****Obsolete Date:****Contract Type:** Either a non-fixed or fixed amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

This service is a cooperative effort between the Division of Services for People with Disabilities and the network of Centers for Independent Living in Utah to provide Support Coordination Liaison services needs are properly identified, a realistic, achievable support plan is developed, and successful implementation of the support plan occurs utilizing available local resources.

The role of the Support Coordination Liaisons will provide the feature of enhanced use of formal and informal services and supports to complete the consumers' plans through increased knowledge of and coordination with the local community resources specific to each community and service district throughout the state. Support Coordination of Liaisons will have the knowledge, authority and responsibility for: 1) maintaining a specialized working knowledge of the support network for persons with disabilities operating in their designated geographical area of the state; 2) coordinating local resources to accomplish the implementation of each individuals' plan as prepared by the Division Physical Disabilities Nurse Coordinator, 3) monitoring the status of each individual as necessary to gather timely, pertinent information to be shared with the Nurse Coordinator and 4) provide consultation to the Nurse Coordinator regarding local parameters that Liaisons will serve solely as consultants to the Physical Disabilities Nurse Coordinator in matters relating to consumer eligibility for the waiver, completion of comprehensive assessments, development of individual plans, and formal agency actions determining the provider network authorized to participate in the waiver, utilization of individual providers, and authorization of covered services for each individual.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$13.88

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Quarter hour	\$13.88

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Quarter hour	Review	05/10/2001	\$13.88	04/30/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM

Service Code: SD1**Creation Date:** 1/25/2001**Service Name: School vacation Day Training Level 1****Obsolete Date:** 07/01/2001**Contract Type:** Open or non-fixed dollar amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

School Vacation Day Training services are provided to school age recipients who require assistance with acquisition, retention or improvement of self direction, socialization and adaptive skills. These services are provided only during school vacation time and when public education programs are unavailable. Services may be furnished 4 to 6 hours per day and must be provided in accordance with the Individual Performance Plan (IPP). The service is not available under programs funded by the Department of Education. The intensity of service provided to the individual is determined by their ICAP service score. This is for an individual in need of level 1 care.

USSDS Rates as of**Unit****Rate****BCM Maximum Allowable Rate (MAR)****Unit****MAR Rate**

Daily

\$32.30

BCM Rate Actions**Unit****Action****Action Date****New Rate****Effective Date**

Daily

Initial Review

04/01/1994

\$29.82

07/01/2000

Daily

COLA

08/09/2001

\$30.93

07/01/2001

Daily

COLA

07/11/2002

\$32.30

07/01/2002

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: SD2
Service Name: School Vacation Day Training Level 2
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

School Vacation Day Training services are provided to school age recipients who require assistance with acquisition, retention or improvement of self direction, socialization and adaptive skills. These services are provided only during school vacation time and when public education programs are unavailable. Services may be furnished 4 to 6 hours per day and must be provided in accordance with the Individual Performance Plan (IPP). The service is not available under programs funded by the Department of Education. The intensity of service provided to the individual is determined by their ICAP service score. This is for an individual in need of level 2 care. (Note: USSDS rate ceiling is based on legislative funding requirements.)

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$36.32

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	04/01/1994	\$33.53	07/01/2000
Daily	COLA	08/09/2001	\$34.78	07/01/2001
Daily	COLA	07/11/2002	\$36.32	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: SD3
Service Name: School Vacation Day Training Level 3
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001
Agencies Using Code
 DSPD

Description:

School Vacation Day Training services are provided to school age recipients who require assistance with acquisition, retention or improvement of self direction, socialization and adaptive skills. These services are provided only during school vacation time and when public education programs are unavailable. Services may be furnished 4 to 6 hours per day and must be provided in accordance with the Individual Performance Plan (IPP). The service is not available under programs funded by the Department of Education. The intensity of service provided to the individual is determined by their ICAP service score. This is for an individual in need of level 3 care. (Note: USSDS rate ceiling is based on legislative funding requirements.)

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$52.66

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	04/01/1994	\$48.62	07/01/2000
Daily	COLA	08/09/2001	\$50.43	07/01/2001
Daily	COLA	07/11/2002	\$52.66	07/01/2002

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division.

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: SDC**Creation Date:** 1/25/2001**Service Name: School Vacation Day Training Crisis****Obsolete Date:****Contract Type:** Either a non-fixed or fixed amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

School Vacation Day Training services are provided to school age recipients who require assistance with acquisition, retention or improvement of self direction, socialization and adaptive skills. These services are provided only during school vacation time and when public education programs are unavailable. Services may be furnished 4 to 6 hours per day and must be provided in accordance with the Individual Performance Plan (IPP). The service is not available under programs funded by the Department of Education. The intensity of service provided to the individual is determined by their ICAP service score. This is for an individual in need of level 3 care and require a 1:1 staffing ratio.

This service has been established for individuals in existing Day Training programs who require a more extensive staffing ratio and level of support services than the School Vacation Day Training Exceptional (SDE). People requiring this individually negotiated service and level of support demand an intensive behavioral oriented crisis program with a minimum of 1:1 staffing for the entire program day.

Payments of rates exceeding USSDS rate will require a fixed contract.

USSDS Rates as of**Unit****Rate**

Daily

\$134.22

Service Eligibility**Eligibility****Description**

SG

SELF DETERM NON-MEDICAID

SM

SELF DETERM MEDICAID

Service Code**Client Assessment/Tx Plan**

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: SDE
Service Name: School Vacation Day Training Level 4-Exception

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

School Vacation Day Training services are provided to school age recipients who require assistance with acquisition, retention or improvement of self direction, socialization and adaptive skills. These services are provided only during school vacation time and when public education programs are unavailable. Services may be furnished 4 to 6 hours per day and must be provided in accordance with the Individual Performance Plan (IPP). The service is not available under programs funded by the Department of Education. The intensity of service provided to the individual is determined by their ICAP service score. This is for an individual in need of level 3 care and require a 1:1 staffing ratio.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$74.14

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$82.24

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	04/01/1993	\$75.92	07/01/2000
Daily	COLA	08/09/2001	\$78.76	07/01/2001
Daily	COLA	07/11/2002	\$82.24	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Day Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to day supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by

the Division . **Record Keeping**

Treatment and service requirements are documented in the individual's plan and Day Supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Hours of supports are established in the individual's Day Supports Worksheet (See Attachment E).

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1-6 inclusive.

Rule R539-8-1A

Policy 2-8 pertaining to Day Supports

Tx/Serv Requirement

Site and Non-Site Based Day Supports serve the purpose of facilitating independence and promoting community inclusion and contribution.

Day Supports provide assistance for individuals to participate in meaningful activities as identified in the individual's support plan and identified outcomes. Supports may or may not be work related. When applicable, wages are paid in accordance with applicable labor laws. Supports may include instruction in skills an individual wishes to acquire, retain, or improve that enhance the individual's independence, and/or maintain the individual's physical and mental skills. Day supports may be provided anytime during a 24-hour day at locations of the individual's preference and are most commonly provided in integrated community settings.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Day Supports are listed in the Day Supports Worksheet (See Attachment E).

Service Code: SDQ**Creation Date:** 1/25/2001**Service Name: Self-Directed Supports****Obsolete Date:****Contract Type:** Open or non-fixed dollar amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

Self-directed supports enhance the person's ability to exercise basic human rights as a member of society through self-sufficiency and utilization of decision making authority. Self-directed supports involve: (a) person and/or family training and education in self determination and self advocacy; (b) competency evaluation and guardianship assistance; (c) advocacy support; (d) identifying building, and maintaining natural supports; (e) assisting a person/family representative to obtain services to assess the person's functional capability to give informed consent; (f) instructing and/or consulting with families on ways to help the family member with a disability learn the specific skills necessary to become as self sufficient as possible; (g) instructing and/or consulting with families on ways to help the family member with a disability learn the specific skills necessary to safely live in the home setting.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$7.50

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Quarter hour	\$7.50

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Quarter hour	Review	09/19/2001	\$7.50	09/19/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: SEA
Service Name: Supported Employment-Hourly Base Rate
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Supported Employment Services provide individuals with disabilities the opportunity to work in a community setting. This is a 1:1 staff to client service. This service is for the first 240 billable units of service and include: a job coach, direct supervision, travel, administration, and marketing. Additional services can be purchased by using ancillary services.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$7.50

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Quarter hour	\$7.95

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Quarter hour	Initial Review	05/01/1994	\$7.34	07/01/2000
Quarter hour	COLA	08/09/2001	\$7.61	07/01/2001
Quarter hour	COLA	07/11/2002	\$7.95	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Supported Employment Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to Supported Employment supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and day supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1, 2, 3B, and 6

Rule R539-8-3

Policy 2-8 pertaining to Supported Employment Supports

Tx/Serv Requirement

This service provides job development, placement, intensive on-the-job training, consultation for employees and follow-up to persons with disabilities in the community.

Supported employment can be full or part time and occurs in an integrated employment setting. Supported Employment may occur anytime during a twenty-four hour day and supports are made available in such a way to assist the individual to achieve competitive employment (compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals who are not disabled). Individuals in Supported Employment are supported and employed in positions which are consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individual as indicated in the individual's support plan. An individual may be supported individually or in a group. When appropriate, the agency providing Supported Employment may contract with a co-worker to provide additional support, under the direction of a job coach, as a natural extension of the workday.

With the individual placement model, a job coach works with the individual until the individual is able to handle the job independently. Follow-up supervision is provided thereafter depending on need and the individual's plan.

As part of an enclave, the person is one of four-to-eight individuals with disabilities who work at a job site. There is always at least one supervisor working with the group. The Enclave model provides the opportunity for integration with other employees as well as ongoing support.

The mobile work crew model is comprised of a small group of individuals who work as a unit to complete a specialized service for individual commercial accounts. The workers move about within the community on a variety of jobs, with a supervisor who provides training and supervision. The obvious benefits to this model are learning to work together on a variety of tasks and community integration.

Limitations: Payment will only be made for adaptations, supervision and training required by an individual as a result of the individual's disability and will not include payment for the supervisory activities rendered as a normal part of a business setting. Documentation that supported employment services rendered under the waiver are not available under a program funded by either the Rehabilitation Act of 1973, or the Individuals with Disabilities Education Act must be maintained (copies of these acts can be obtained from the internet at www.civilrights.com/idea.html and [ftp://trace.wisc.edu/PUB/TEXT/ILAWS/REHABACT/PARTS/TLT_V.TXT](http://trace.wisc.edu/PUB/TEXT/ILAWS/REHABACT/PARTS/TLT_V.TXT)). Federal Financial Participation will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as incentive payments made to an employer or beneficiaries to encourage or subsidize an employer's participation in a supported employment program, payments that are passed through to a beneficiary of Supported Employment programs, or for payments for vocational training that is not directly related to a beneficiary's Supported Employment program.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Supported Employment Supports are listed in the Day Supports Worksheet (Attachment E).

Service Code: SEB
Service Name: Supported Employment-Hourly Ancillary
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Supported Employment Services provide individuals with disabilities the opportunity to work in a community setting. This is a 1:1 staff to client service. This service is for billable units of service beyond the first 240 units of SEA services. Included in this service are: a job coach, direct supervision, and travel. Additional services can be purchased by using ancillary services.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$3.23

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Quarter hour	\$3.38

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Quarter hour	Initial Review	05/01/1994	\$3.12	07/01/2000
Quarter hour	COLA	08/09/2001	\$3.23	07/01/2001
Quarter hour	COLA	07/11/2002	\$3.38	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Supported Employment Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to Supported Employment supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and day supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1, 2, 3B, and 6

Rule R539-8-3

Policy 2-8 pertaining to Supported Employment Supports

Tx/Serv Requirement

This service provides job development, placement, intensive on-the-job training, consultation for employees and follow-up to persons with disabilities in the community.

Supported employment can be full or part time and occurs in an integrated employment setting. Supported Employment may occur anytime during a twenty-four hour day and supports are made available in such a way to assist the individual to achieve competitive employment (compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals who are not disabled). Individuals in Supported Employment are supported and employed in positions which are consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individual as indicated in the individual's support plan. An individual may be supported individually or in a group. When appropriate, the agency providing Supported Employment may contract with a co-worker to provide additional support, under the direction of a job coach, as a natural extension of the workday.

With the individual placement model, a job coach works with the individual until the individual is able to handle the job independently. Follow-up supervision is provided thereafter depending on need and the individual's plan.

As part of an enclave, the person is one of four-to-eight individuals with disabilities who work at a job site. There is always at least one supervisor working with the group. The Enclave model provides the opportunity for integration with other employees as well as ongoing support.

The mobile work crew model is comprised of a small group of individuals who work as a unit to complete a specialized service for individual commercial accounts. The workers move about within the community on a variety of jobs, with a supervisor who provides training and supervision. The obvious benefits to this model are learning to work together on a variety of tasks and community integration.

Limitations: Payment will only be made for adaptations, supervision and training required by an individual as a result of the individual's disability and will not include payment for the supervisory activities rendered as a normal part of a business setting. Documentation that supported employment services rendered under the waiver are not available under a program funded by either the Rehabilitation Act of 1973, or the Individuals with Disabilities Education Act must be maintained (copies of these acts can be obtained from the internet at www.civilrights.com/idea.html and [ftp://trace.wisc.edu/PUB/TEXT/ILAWS/REHABACT/PARTS/TLT_V.TXT](http://trace.wisc.edu/PUB/TEXT/ILAWS/REHABACT/PARTS/TLT_V.TXT)). Federal Financial Participation will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as incentive payments made to an employer or beneficiaries to encourage or subsidize an employer's participation in a supported employment program, payments that are passed through to a beneficiary of Supported Employment programs, or for payments for vocational training that is not directly related to a beneficiary's Supported Employment program.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Supported Employment Supports are listed in the Day Supports Worksheet (Attachment E).

Service Code: SEC
Service Name: Supported Employment Co-Worker Supports
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Supported Employment serves the purposes of supporting individuals, based on individual need, to obtain, maintain, or advance to competitive employment in integrated work settings. An individual may be supported individually or in a group. When appropriate, the agency providing Supported Employment may contract with a co-worker to provide additional supports, under the direction of a job coach, as a natural extension of the workday.
 Hourly pay rate for co-worker support will not exceed more than \$4.00 per hour which includes the provider adding no more than a 10% fee for handling the individual's wages, setting up contracts and agreements with the individual and/or their employer.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$1.02

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Supported Employment Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to Supported Employment supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and day supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule: Policy 2-7 Procedures 1, 2, 3B, and 6

Rule R539-8-3

Policy 2-8 pertaining to Supported Employment Supports

Tx/Serv Requirement

This service provides job development, placement, intensive on-the-job training, consultation for employees and follow-up to persons with disabilities in the community.

Supported employment can be full or part time and occurs in an integrated employment setting. Supported Employment may occur anytime during a twenty-four hour day and supports are made available in such a way to assist the individual to achieve competitive employment (compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals who are not disabled). Individuals in Supported Employment are supported and employed in positions which are consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individual as indicated in the individual's support plan. An individual may be supported individually or in a group. When appropriate, the agency providing Supported Employment may contract with a co-worker to provide additional support, under the direction of a job coach, as a natural extension of the workday.

With the individual placement model, a job coach works with the individual until the individual is able to handle the job independently. Follow-up supervision is provided thereafter depending on need and the individual's plan.

As part of an enclave, the person is one of four-to-eight individuals with disabilities who work at a job site. There is always at least one supervisor working with the group. The Enclave model provides the opportunity for integration with other employees as well as ongoing support.

The mobile work crew model is comprised of a small group of individuals who work as a unit to complete a specialized service for individual commercial accounts. The workers move about within the community on a variety of jobs, with a supervisor who provides training and supervision. The obvious benefits to this model are learning to work together on a variety of tasks and community integration.

Limitations: Payment will only be made for adaptations, supervision and training required by an individual as a result of the individual's disability and will not include payment for the supervisory activities rendered as a normal part of a business setting. Documentation that supported employment services rendered under the waiver are not available under a program funded by either the Rehabilitation Act of 1973, or the Individuals with Disabilities Education Act must be maintained (copies of these acts can be obtained from the internet at www.civilrights.com/idea.html and http://trace.wisc.edu/PUB/TEXT/ILAWS/REHABACT/PARTS/TLT_V.TXT). Federal Financial Participation will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as incentive payments made to an employer or beneficiaries to encourage or subsidize an employer's participation in a supported employment program, payments that are passed through to a beneficiary of Supported Employment programs, or for payments for vocational training that is not directly related to a beneficiary's Supported Employment program.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Supported Employment Supports are listed in the Day Supports Worksheet (Attachment E).

Service Code: SED
Service Name: Supported Employment Service-Daily
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Supported Employment Services provide individuals with disabilities the opportunity to work in a community setting. Individuals may work in several models of service such as Mobile work crews and Enclaves of not more than 8 individuals.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Daily	\$30.83

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Daily	\$33.49

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Daily	Initial Review	05/01/1994	\$30.92	07/01/2000
Daily	COLA	08/09/2001	\$32.08	07/01/2001
Daily	COLA	07/11/2002	\$33.49	07/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Supported Employment Supports can be found on the Day Supports Worksheet.

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to Supported Employment supports as well as all applicable licensing and certification requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and day supports worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and

Staff to Client Ratios

Staff to client ratios are 1:1.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:

Policy 2-7 Procedures 1, 2, 3B, and 6

Rule R539-8-3

Policy 2-8 pertaining to Supported Employment Supports

Tx/Serv Requirement

This service provides job development, placement, intensive on-the-job training, consultation for employees and follow-up to persons with disabilities in the community.

Supported employment can be full or part time and occurs in an integrated employment setting. Supported Employment may occur anytime during a twenty-four hour day and supports are made available in such a way to assist the individual to achieve competitive employment (compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals who are not disabled). Individuals in Supported Employment are supported and employed in positions which are consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individual as indicated in the individual's support plan. An individual may be supported individually or in a group. When appropriate, the agency providing Supported Employment may contract with a co-worker to provide additional support, under the direction of a job coach, as a natural extension of the workday.

With the individual placement model, a job coach works with the individual until the individual is able to handle the job independently. Follow-up supervision is provided thereafter depending on need and the individual's plan.

As part of an enclave, the person is one of four-to-eight individuals with disabilities who work at a job site. There is always at least one supervisor working with the group. The Enclave model provides the opportunity for integration with other employees as well as ongoing support.

The mobile work crew model is comprised of a small group of individuals who work as a unit to complete a specialized service for individual commercial accounts. The workers move about within the community on a variety of jobs, with a supervisor who provides training and supervision. The obvious benefits to this model are learning to work together on a variety of tasks and community integration.

Limitations: Payment will only be made for adaptations, supervision and training required by an individual as a result of the individual's disability and will not include payment for the supervisory activities rendered as a normal part of a business setting. Documentation that supported employment services rendered under the waiver are not available under a program funded by either the Rehabilitation Act of 1973, or the Individuals with Disabilities Education Act must be maintained (copies of these acts can be obtained from the internet at www.civilrights.com/idea.html and [ftp://trace.wisc.edu/PUB/TEXT/ILAWS/REHABACT/PARTS/TLT_V.TXT](http://trace.wisc.edu/PUB/TEXT/ILAWS/REHABACT/PARTS/TLT_V.TXT)). Federal Financial Participation will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as incentive payments made to an employer or beneficiaries to encourage or subsidize an employer's participation in a supported employment program, payments that are passed through to a beneficiary of Supported Employment programs, or for payments for vocational training that is not directly related to a beneficiary's Supported Employment program.

Staff Requirements

Staffing requirements are established in the individual worksheets. Types of supports included in Supported Employment Supports are listed in the Day Supports Worksheet (Attachment E).

Service Code: SL4**Service Name: Supported Living (Consultant)****Contract Type:** Open or non-fixed dollar amount contract required**Residential:** No**Creation Date:** 10/24/2001**Obsolete Date:** 09/01/2002**Agencies Using Code**

DSPD

Description:

A professional consultant with a master's degree or equivalent provides support to the individual with disabilities or those who provide care to the individuals in order for the individual to achieve their potential.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$7.71

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Quarter hour	\$7.71

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Quarter hour	Review	10/24/2001	\$7.71	09/27/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: SLA**Service Name: Supported Living Assistance****Contract Type:** Open or non-fixed dollar amount contract required**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:****Agencies Using Code**

DSPD

Description:

Supported Living Assistance services are designed to support individuals who live in their own homes or apartment by providing assistance/supports in activities such as meal preparation, routine household care, activities of daily living (such as bathing, eating, dressing, personal hygiene), reminding/ observing/ monitoring of medication and non-medical care. These services must not be available under the State plan.

USSDS Rates as of**Unit****Rate**

Quarter hour

\$3.47

Service Eligibility**Eligibility****Description**

SG

SELF DETERM NON-MEDICAID

SM

SELF DETERM MEDICAID

Service Code: SLH
Service Name: Community Supported Living (Own Home/Hourly Model)

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Community Supported Living Services Hourly Model provides services to individuals with disabilities who reside in their own home or apartment. These services are tailored to meet the individuals needs. These services assist the individual in acquiring improved self-help, socialization, and adaptive skills necessary to reside successfully in the community setting.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$5.11

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet (Attachment E).

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to supported living supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1 or less of more than one individual is receiving the support at the same time.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
Policy 2-7 Provider Training and Personnel Requirements
Rule R539-8-8

Tx/Serv Requirement

Supported Living Support (SLH) services are designed to assist individuals who secure their own home or apartment. (previously known as apartment follow along, hourly residential) Supports are provided to assist them to live with maximum independence. Services are provided on a regularly scheduled basis and are available to individuals who live alone, with roommates, a spouse, or children. Supported Living supports include instruction in activities such as meal preparation, routine household care, activities of daily living (such as bathing, eating, dressing, personal hygiene), reminding/observing/reinforcing. Monitoring of medication, non-medical care, supervision and socialization. Daily Living activity skills are provided to individuals to ensure his/her health and safety as well as to lead to desired outcomes outlined in the individual's plan. Supports may be provided in the individual's home and in settings outside of the home in accordance with the Individual's Plan. These services must not be available under the State Medicaid Plan.

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to persons under 22 living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual's plan.

Service Code: SLN
Service Name: Supported Living Supports-Natural Supports
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

This is a residential support. This support is for individuals over the age of 22 who previously received Family Support Services in their home.

The Home and Community based Amendment requires individuals over 22 living in their own home receive supported living rather than family support. This service recognizes individuals as adults who require support; natural and paid services to function in the community as an adult.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$4.62

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code

Client Assessment/Tx Plan

The division is responsible for assisting the individual in developing their person centered plan. The individual service plan is developed based on the supports listed in the Person Centered Plan and other supports identified as important to the person. These plans are developed by the individual and their support coordinator prior to the delivery of services. Each individual also has an authorized spending limit that cannot be exceeded when purchasing supports from providers. The array of services available for Community Living Residential Supports can be found on the Community Living Supports Worksheet (Attachment E).

Contractor Qualifications

Providers must comply with all division policies and guidelines pertaining to supported living supports as well as all applicable licensing requirements.

Population Served

Services are provided to individuals who meet the definition of disabled in the Utah Code Annotated § 62A-5-101, and found eligible by the Division .

Record Keeping

Treatment and service requirements are documented in the individual's plan and community living worksheet.

SPECIAL RECORD KEEPING REQUIREMENTS

Providers are required to meet division policies and guidelines governing records, including but not limited to individual's records, and file documentation and retention outlined in Policy 5-5, Guideline 5-5 and Policy 5-6, Utah Administrative Rule R539-1, 3.

Staff to Client Ratios

Staff to client ratios are 1:1 or less of more than one individual is receiving the support at the same time.

Staff Training

Provider and staff must meet all requirements specified in Division Policy and Rule:
 Policy 2-7 Provider Training and Personnel Requirements
 Rule R539-8-8

Policy 2-8 pertaining to Supported Living

Tx/Serv Requirement

Supported Living Assistance (SLN) services (previously known as daily residential) are designed to support individuals who live in their own home or apartment. They can live alone and/or with roommates. Training and support is provided to assist them to live with maximum independence. Services are provided on a regularly scheduled basis. Supported living supports may include training in activities such as meal preparation, routine household care, activities of daily living (such as bathing, eating, dressing, personal hygiene), reminding/observing/reinforcing (behavioral assessment and support). These services and supports are delivered to ensure his/her health and safety as well as lead to desired outcomes outlined in the individual's plan. Supports may be provided in the individual's home and in settings outside of the home in accordance with the Individual's Plan. These services are not available under the State Medicaid Plan.

Limitations: Payments for residential supports are not made for room and board, the cost of facility maintenance, or routine upkeep and improvement, other than costs for modifications or adaptations to a facility required to assure the health, safety, and accessibility of the individuals who reside there, consistent with the criteria established for the Environmental Accessibility Adaptation waiver service. Community Living Support is not available to persons under 22 living in their parent/legal guardian's home.

Staff Requirements

Staffing requirements are established in the individual's plan.

Service Code: SM1

Service Name: Specialized Medical Needs

Contract Type: No contract allowed for this service

Residential: No

Creation Date: 1/25/2001

Obsolete Date:

Agencies Using Code

DSPD

Description:

Supplies and Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices and safety control. These services must not be available under the State plan.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Personal Need	\$1,999.99

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: SM2
Service Name: Specialized Medical Needs
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Supplies and Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices and safety control. These services must not be available under the State plan.

To use this code you must have prior approval from the Division.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Personal Need	\$10,000.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: SME
Service Name: Specialized Medical Needs
Contract Type: No contract allowed for this service
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
DSPD

Description:

Supplies and Assistive Devices including transportation devices, mobility devices, communication devices, bathing and bathroom devices, eating devices and safety control. These services must not be available under the State plan.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Month	\$300.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
BM	SPINAL CHORD MEDICAID
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: SNF
Service Name: Special Needs Fund-Over the counter checks

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: No contract allowed for this service
Residential: No

Agencies Using Code
 DSPD

Description:

This code is used for the over the counter checks issued at the Regional office level to provide emergency purchases for individuals meeting Division eligibility.

The regional special needs funds are to be used at the discretion of the Regional Support Coordinator and Administration to make critical item purchases on behalf of an individual receiving services, where the item is essential to the individual's safety, well being, or continued successful community living. No single SNF purchase may exceed \$500 for over the counter checks without Finance's prior approval, and no single SNF purchase may exceed \$2000 without also the 295S payment form.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Personal Need	\$2,000.00

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
BG	SPINAL CHORD GENERAL FUND
PG	NON-MEDICAID ASSISTANCE
SG	SELF DETERM NON-MEDICAID

Service Code: SR1
Service Name: School Vacation Extended Residential Support
Level 1

Creation Date: 1/25/2001
Obsolete Date: 06/30/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

School Vacation Extended Support services funding is used to provide extended residential support services, up to six hours per day, to school age individuals who reside in residential settings during the period of time that they are on school vacation and when public education programs are unavailable. The focus of the support is to provide assistance with acquisition, retention, or improvement of self direction, socialization and adaptive skills. These services are provided in accordance with the recipient's plan of care. The level of service is determined by the individual's ICAP Service score. This code is for individuals in need of ICAP level 1 & 2 care.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Hourly	\$5.35

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Hourly	Initial Review	08/01/2000	\$4.94	07/01/2000
Hourly	COLA	08/30/2001	\$5.12	07/01/2001
Hourly	COLA	07/12/2002	\$5.35	07/01/2002

Service Code: SR2
Service Name: School Vacation Extended Residential Support
 Level 2

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

School Vacation Extended Support services funding is used to provide extended residential support services, up to six hours per day, to school age individuals who reside in residential settings during the period of time that they are on school vacation and when public education programs are unavailable. The focus of the support is to provide assistance with acquisition, retention, or improvement of self direction, socialization and adaptive skills. These services are provided in accordance with the recipient's plan of care. The level of service is determined by the individual's ICAP Service score. This code is for individuals in need of ICAP level 3 & 4 care.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Hourly	\$6.69

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Hourly	Review	08/09/2001	\$6.17	01/31/2001
Hourly	COLA	08/09/2001	\$6.40	07/01/2001
Hourly	COLA	07/12/2002	\$6.69	07/01/2002

Service Code: SR3
Service Name: School Vacation Extended Residential Support
Level 3

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

School Vacation Extended Support services funding is used to provide extended residential support services, up to six hours per day, to school age individuals who reside in residential settings during the period of time that they are on school vacation and when public education programs are unavailable. The focus of the support is to provide assistance with acquisition, retention, or improvement of self direction, socialization and adaptive skills. These services are provided in accordance with the recipient's plan of care. The level of service is determined by the individual's ICAP Service score. This code is for individuals in need of ICAP level 5 care.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
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BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Hourly	\$10.18

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Hourly	Review	08/09/2001	\$9.40	01/31/2001
Hourly	COLA	08/09/2001	\$9.75	07/01/2001
Hourly	COLA	07/12/2002	\$10.18	07/01/2002

Service Code: SR4
Service Name: School Vacation Extended Residential Support Level 4

Creation Date: 1/25/2001
Obsolete Date: 07/01/2001

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

School Vacation Extended Support services funding is used to provide extended residential support services, up to six hours per day, to school age individuals who reside in residential settings during the period of time that they are on school vacation and when public education programs are unavailable. The focus of the support is to provide assistance with acquisition, retention, or improvement of self direction, socialization and adaptive skills. These services are provided in accordance with the recipient's plan of care. The level of service is determined by the individual's ICAP Service score. This code is for individuals in need of ICAP level 5 care and requires a 1:1 staffing ratio.

USSDS Rates as of
Unit

Rate

BCM Maximum Allowable Rate (MAR)

Unit

MAR Rate

Hourly

\$15.00

BCM Rate Actions

Unit

Action

Action Date

New Rate

Effective Date

Hourly

Review

08/09/2001

\$13.85

01/31/2001

Hourly

COLA

08/09/2001

\$14.36

07/01/2001

Hourly

COLA

07/12/2002

\$15.00

07/01/2002

Service Code: SSA
Service Name: Specialized Supports/Acupuncture Treatments

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
 DSPD

Description:

Specialized Supports/Acupuncture Treatments serve the purpose of providing: a) treatment, training, consultation, or other unique services necessary to achieve stated outcomes that are not otherwise achievable through Medicaid State Plan services or other Waiver supports, or b) non-traditional approaches to care that are effective in achieving desired outcomes in a manner that is cost-effective and responsible to the person's cultural norms and desired treatment strategies. Specialized supports will not duplicate other supports and services available to the person, must be cost effective, and must have demonstrated effectiveness for the intended use. Acupuncture Treatments are not available under the Medicaid State Plan optional service. Acupuncture Treatments would meet treatment requirements according to Utah Administrative Rule R156-72.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$53.25

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: SSC
Service Name: Specialized Supports/Chiropractic Therapy
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Specialized Supports/Chiropractic Therapy serves the purpose of providing: a) treatment, training, consultation, or other unique services necessary to achieve stated outcomes that are not otherwise achievable through Medicaid State Plan services or other Waiver supports, or b) non-traditional approaches to care that are effective in achieving desired outcomes in a manner that is cost-effective and responsible to the person's cultural norms and desired treatment strategies. Specialized supports will not duplicate other supports and services available to the person, must be cost effective, and must have demonstrated effectiveness for the intended use. Chiropractic Therapy is of a nature, amount, duration or frequency beyond the available Medicaid State Plan optional services, according to Utah Administrative Rule R156-73.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$30.72

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: SSD
Service Name: Specialized Supports/Diet Management
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Specialized Supports/Diet Management serves the purpose of providing: a) treatment, training, consultation, or other unique services necessary to achieve stated outcomes that are not otherwise achievable through Medicaid State Plan services or other Waiver supports, or b) non-traditional approaches to care that are effective in achieving desired outcomes in a manner that is cost-effective and responsible to the person's cultural norms and desired treatment strategies. Specialized supports will not duplicate other supports and services available to the person, must be cost effective, and must have demonstrated effectiveness for the intended use. Diet Management supports are not available under the Medicaid State Plan optional service. The amount and frequency of Diet Management supports will be based upon the individual's Individualized Support Plan. The individualized diet management program must be based upon a recommendation by a physician or registered dietitian not associated with the diet management program.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$35.84

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: SSM**Creation Date:** 1/25/2001**Service Name: Specialized Supports/Message Therapy****Obsolete Date:****Contract Type:** Open or non-fixed dollar amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

Specialized Supports/Message Therapy serves the purpose of providing: a) treatment, training, consultation, or other unique services necessary to achieve stated outcomes that are not otherwise achievable through Medicaid State Plan services or other Waiver supports, or b) non-traditional approaches to care that are effective in achieving desired outcomes in a manner that is cost-effective and responsible to the person's cultural norms and desired treatment strategies. Specialized supports will not duplicate other supports and services available to the person, must be cost effective, and must have demonstrated effectiveness for the intended use. Message Therapy is not available under the Medicaid State Plan optional service. Message Therapy must meet treatment requirements according to Utah Administrative Rule R156-47b.

USSDS Rates as of**Unit****Rate**

Quarter hour

\$12.80

Service Eligibility**Eligibility****Description**

SG

SELF DETERM NON-MEDICAID

SM

SELF DETERM MEDICAID

Service Code: SSS
Service Name: Specialized Supports/Communication Supports

Creation Date: 1/25/2001
Obsolete Date:

Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Agencies Using Code
DSPD

Description:
Specialized Supports/Communication Supports services the purpose of providing: a) treatment, training, consultation, or other unique services necessary to achieve stated outcomes that are not otherwise achievable through Medicaid State Plan services or other Waiver supports, or b) non-traditional approaches to care that are effective in achieving desired outcomes in a manner that is cost-effective and responsible to the person's cultural norms and desired treatment strategies. Specialized supports will not duplicate other supports and services available to the person, must be cost effective, and must have demonstrated effectiveness for the intended use. Communication Supports, is of a nature, amount, duration, or frequency beyond the available Medicaid State Plan optional services for speech therapy services.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Quarter hour	\$9.19

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: STC**Service Name: Residential Start Up Costs****Contract Type:** No contract allowed for this service**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:****Agencies Using Code**

DSPD

Description:

To provide funds for activities that will be of time limited duration or for start up costs of new programs. Example of use of fund would be the rent for space at swimming pools for residential clients.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Session	\$4,300.00
Personal Need	\$75.00

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Personal Need	\$75.00

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Personal Need	Review	09/19/2001	\$75.00	09/01/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
PG	NON-MEDICAID ASSISTANCE
PM	MEDICAID ASSISTANCE
PN	MEDICAID ASSISTANCE NURSING HM
SG	SELF DETERM NON-MEDICAID

Service Code**Client Assessment/Tx Plan**

N/A

Contractor Qualifications

Providers must be approved day, community living residential or residential providers and must obtain prior approval from the region.

Prior approval by the region director is required. Start-up costs are to be negotiated between the region and provider based upon the needs of the individual to establish a comfortable and functional living environment. Start-up funds are limited based upon region budgets. Individuals are encouraged to use their own funds, as much as possible, to purchase furniture and items for their living environment.

Other**DOCUMENTATION REQUIREMENTS**

Division day, community living support contracts include a Start-up cost code (STC) which allows for reimbursement on an individual basis by means of a 295S billing form. Original sales slips or invoices must be attached to the billing form to verify expenses.

Population Served

Individuals placed in new living arrangements and/or new day support settings.

Staff to Client Ratios

N/A

Tx/Serv Requirement

Eligible purchases may include: home furniture, major and small appliances, kitchen supplies, domestic, bathroom accessories, life safety purchases, remodeling to meet individual treatment needs, rent deposits, utility hook up charges, and therapeutic supplies (this is not an inclusive list; the Region Director may approve other items not listed).

Non eligible purchases include: general supplies less than \$5.00 with a useful life of less than one year, personal care items, provider business/office supplies, general program repair and yard and maintenance supplies.

Staff Requirements

N/A

Service Code: TXI**Service Name:** Transportation Supports/Taxi**Contract Type:** Open or non-fixed dollar amount contract required**Residential:** No**Creation Date:** 1/25/2001**Obsolete Date:****Agencies Using Code**

DSPD

Description:

Transportation supports serve the purpose of allowing the person access to other supports necessary to live an inclusive community life. They are only provided as independent services when transportation is not otherwise available as an element of another service. The need for transportation must be documented as necessary to fulfill other identified support in the Individual Service Plan and the associated documents.

Transportation Supports/Taxi will pay up to \$1.60 per mile for the actual miles traveled.

USSDS Rates as of**Unit**

Mile

Rate

\$1.50

Service Eligibility**Eligibility**

SG

SM

Description

SELF DETERM NON-MEDICAID

SELF DETERM MEDICAID

Service Code: UTA
Service Name: Transportation Supports/Bus Pass
Contract Type: Open or non-fixed dollar amount contract required
Residential: No

Creation Date: 1/25/2001
Obsolete Date:
Agencies Using Code
 DSPD

Description:

Transportation supports serve the purpose of allowing the person access to other supports necessary to live an inclusive community life. They are only provided as independent services when transportation is not otherwise available as an element of another service. The need for transportation must be documented as necessary to fulfill other identified support in the Individual Service Plan and the associated documents.

Transportation Supports/Bus Pass will pay for the actual Bus Pass costs up to the Adult Fare.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Month	\$40.00

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Month	\$40.00

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Month	Initial Review	03/27/2002	\$40.00	01/01/2002

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
SG	SELF DETERM NON-MEDICAID
SM	SELF DETERM MEDICAID

Service Code: WLG**Creation Date: 4/30/2001****Service Name: Waiting List Grant****Obsolete Date: 09/01/2002****Contract Type:** Either a non-fixed or fixed amount contract required**Agencies Using Code****Residential:** No

DSPD

Description:

Payments will be made to individuals with disabilities on the DSPD waiting list. Grants are made to provide services and supports to enhance the person's quality of life and assisting the family in maintaining the individual in the family home. Waiting List payments will be one time payments.

USSDS Rates as of

<u>Unit</u>	<u>Rate</u>
Personal Need	\$1,999.99

BCM Maximum Allowable Rate (MAR)

<u>Unit</u>	<u>MAR Rate</u>
Personal Need	\$1,999.99

BCM Rate Actions

<u>Unit</u>	<u>Action</u>	<u>Action Date</u>	<u>New Rate</u>	<u>Effective Date</u>
Personal Need	Review	05/10/2001	\$1,999.99	04/05/2001

Service Eligibility

<u>Eligibility</u>	<u>Description</u>
MR	MR/DD
SG	SELF DETERM NON-MEDICAID